

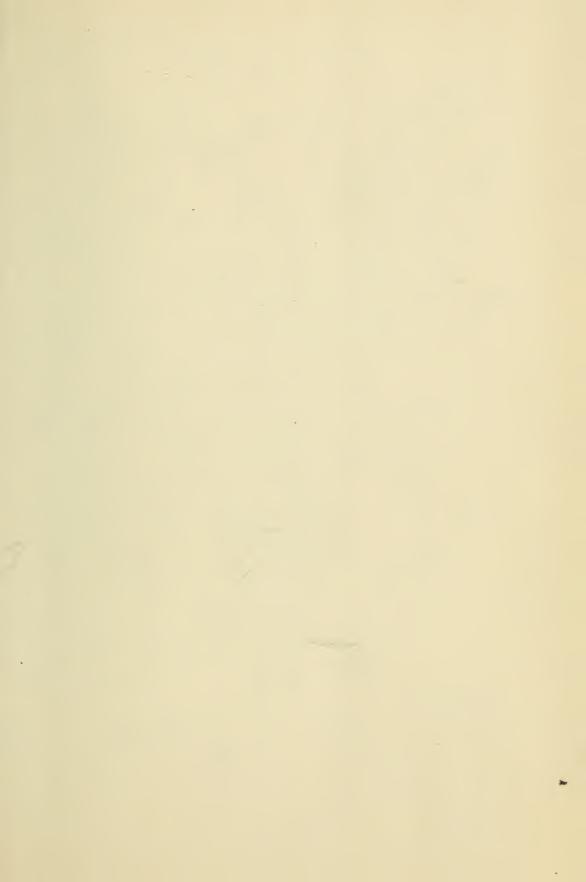
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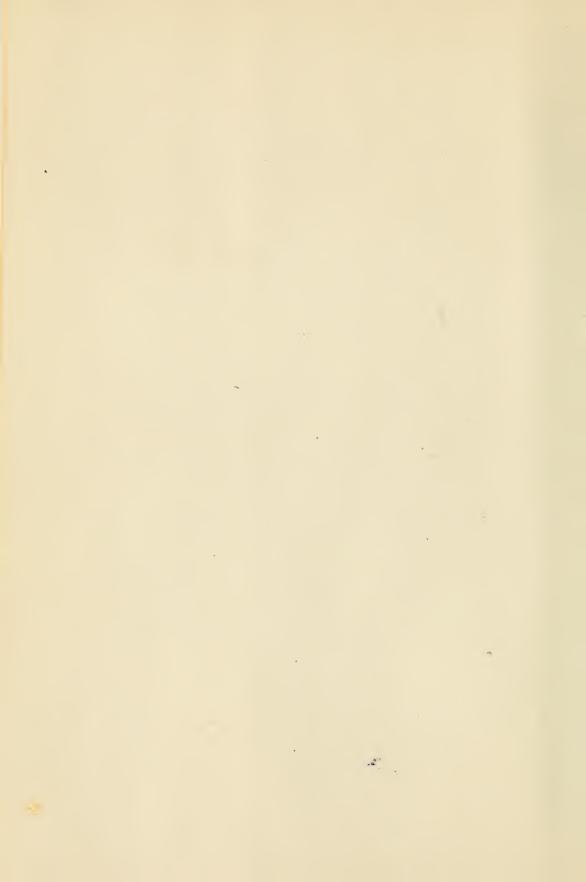


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THE

MEDICAL SCHOOL



1900-01

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ANNOUNCEMENT

OF THE

MEDICAL SCHOOL

(688 BOYLSTON STREET, BOSTON, MASS.)

 \mathbf{OF}

HARVARD UNIVERSITY

FOR

1900-1901



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MEDICAL SCHOOL CALENDAR.

1900.

Sept. 24, Monday. Examinations for admission.

Sept. 24. Monday. Examinations begin for applicants for advanced standing, and for men previously conditioned.

Sept. 27, Thursday. Academic Year begins. Registration of Students.

Nov. 1, Thursday. Last day for receiving essays for the William H.

Thorndike Prize.

Nov. 29, Thursday. Thanksgiving Day: a holiday.

Nov. 30, Friday. Last day for receiving applications for the Cheever and Hayden Scholarships.

Recess from Dec. 23, 1900, to Jan. 2, 1901, inclusive.

1901.

Jan. 1, Tuesday. Last day for receiving dissertations for the Boylston Medical Prizes.

Feb. 1, Friday. Second half-year begins.

Feb. 22, Friday. Washington's Birthday: a holiday.

April 1, Monday. Last day for receiving dissertations for the Bowdoin Prizes.

RECESS FROM APRIL 14 TO APRIL 20, INCLUSIVE.

April 30, Tuesday. Last day for receiving applications from students in the Professional Schools to be qualified for the degree of A.M. in 1901.

May 1, Wednesday. Last day for receiving dissertations for the Dante, Toppan, and Sumner Prizes.

May 30, Thursday. Memorial Day: a holiday.

May 31, Friday. Last day for receiving applications of candidates for the degree of M.D. in 1901.

June 1, Saturday. Last day for receiving applications for Scholarships for 1901-02 (except the Cheever and Hayden Scholarships).

June 1. Saturday. Examinations begin.

June 26, Wednesday. Commencement.

June 27. Thursday. Examination in Chemistry for admission.

Summer Vacation of Thirteen Weeks, from Commencement to September 25, inclusive.

Sept. 19. Thursday. Examinations begin for applicants for advanced standing, and for men previously conditioned.

Sept. 25, Wednesday. Examination in Chemistry for admission.

Sept. 26, Thursday. Academic Year begins. Registration of Students.

Nov. 1, Friday. Last day for receiving essays for the William H. Thorndike Prize.

Nov. 28, Thursday. Thanksgiving Day: a holiday.

Nov. 30, Saturday. Last day for receiving applications for the Cheever and Hayden Scholarships.

THE MEDICAL SCHOOL.

FACULTY OF MEDICINE.*

CHARLES W. ELIOT, LL.D., PRESIDENT.

WILLIAM L. RICHARDSON, M.D., DEAN, and Professor of Obstetrics.

JAMES C. WHITE. M.D., Professor of Dermatology.

OLIVER F. WADSWORTH, M.D., Williams Professor of Ophthal-mology.

HENRY P. BOWDITCH, M.D., LL.D., D.Sc., Professor of Physiology. CLARENCE J. BLAKE, M.D., Professor of Otology.

FRANK W. DRAPER, M.D., Professor of Legal Medicine.

CHARLER, M.D., Projessor of Legal Medicine.

CHARLES B. PORTER. M.D.. Professor of Clinical Surgery.

J. ORNE GREEN. M.D.. Clinical Professor of Otology.

J. COLLINS WARREN. M.D., LL.D., Hon. F.R.C.S., Moseley Professor of Surgery.

REGINALD H. FITZ, M.D., Hersey Professor of the Theory and Practice of Physic.

THOMAS DWIGHT, M.D., LL.D., Parkman Professor of Anatomy. THOMAS FILLEBROWN, M.D., D.M.D., Professor of Operative Dentistry and Oral Surgery.

JAMES J. PUTNAM, M.D., Professor of Diseases of the Nervous System. EDWARD S. WOOD, M.D., Professor of Chemistry.

FREDERICK C. SHATTUCK, M.D., Jackson Professor of Clinical Medicine.

EDWARD H. BRADFORD, M.D., Assistant Professor of Orthopedics.

CHARLES A. BRACKETT, D.M.D., Professor of Dental Pathology.

FRANCIS H. DAVENPORT, M.D., Assistant Professor of Gynaecology.

THOMAS M. ROTCH, M.D., Professor of the Diseases of Children.

WILLIAM B. HILLS, M.D., Associate Professor of Chemistry.

EUGENE H. SMITH, D.M.D., Professor of Mechanical Dentistry and Orthodontia and Dean of the Dental School.

WILLIAM F. WHITNEY, M.D., Curator of the Anatomical Museum.

CHARLES S. MINOT, S.D., LL.D., Professor of Histology and Human Embryology.

^{*} Arranged here and elsewhere in the Catalogue, with the exception of the President and Dean, on the basis of collegiate seniority.

MAURICE H. RICHARDSON, M.D., Assistant Professor of Clinical Surgery.

CHARLES M. GREEN, M.D., Assistant Professor of Obstetrics, and Secretary of the Faculty.

CHARLES P. LYMAN, F.R.C.V.S., Professor of Veterinary Medicine, and Dean of the School of Veterinary Medicine.

EDWARD C. BRIGGS, M.D., D.M.D., Professor of Dental Materia Medica and Therapeutics.

WILLIAM T. COUNCILMAN, M.D., Shattuck Professor of Pathological Anatomy.

HERBERT L. BURRELL, M.D., Assistant Professor of Surgery.

HAROLD C. ERNST, M.D., Professor of Bacteriology.

FREDERICK H. OSGOOD, S.B., M.R.C.V.S., Professor of Veterinary Surgery.

CHARLES HARRINGTON, M.D., Assistant Professor of Hygiene.

THEOBALD SMITH, M.D., George Fabyan Professor of Comparative Pathology.

FRANZ PFAFF, M.D., Assistant Professor of Pharmacology and Therapeutics.

WILLIAM T. PORTER, M.D., Associate Professor of Physiology. FRANKLIN DEXTER, M.D., Associate Professor of Anatomy. FRANK B. MALLORY, M.D., Assistant Professor of Pathology.

WILLIAM A. BROOKS, Jr., M.D., Demonstrator of Anatomy.

STANDING COMMITTEES FOR THE MEDICAL SCHOOL.

Course of Study. — Dr. Fitz (Chairman), and Drs. Bowditch, Draper, W. L. Richardson, Dwight, Shattuck, and Bradford.

Nominations. — Dr. Burrell (Chairman), and Drs. Whitney, Minot, Harrington, and Brooks.

Graduate Courses. — Dr. Wadsworth (Chairman), and Drs. Bradford, Burrell, Smith, and Dexter.

Summer Courses. — Dr. Draper (Chairman), and Drs. J. O. Green and Putnam.

Admission. — Dr. W. L. Richardson (Chairman), and Drs. C. M. Green and Mallory.

THE MEDICAL SCHOOL.

BOSTON.

GENERAL STATEMENT.

Three professorships of Medicine were established at the University in the years 1782 and 1783. The first degrees in Medicine were conferred in 1788. Before 1811, the degree conferred upon graduates of the School was that of Bachelor of Medicine; beginning with 1811, the degree has been Doctor of Medicine. In 1810, the lectures given in Medicine were transferred from Cambridge to Boston, where the first Medical College was built in 1815.

The course of study required in this School for the degree of M.D. is of four years' duration. This requirement was established at the beginning of the year 1892-93.

The academic year begins on the Thursday following the last Wednesday in September, and ends on the last Wednesday in June. In order that the time of study shall count as a full year, students of all classes must present themselves within the first week of the school year and register their names with the Secretary.

There is a Christmas recess from December 23 to January 2 inclusive, and a recess of one week's duration in April.

Beginning with the year 1899-1900 a new arrangement of the subjects taught in the first two years was adopted. During the first half of the first year the students devote their time solely to Anatomy and Histology, and during the second half of the first year to Physiology and Physiological Chemistry. They devote the first half of the second year to Pathology and Bacteriology, and the remainder of the second year to a variety of subjects which more particularly prepare the student for the clinical work of the third and fourth years.

It is believed that this logical arrangement of the subjects of the first two years enables a student to concentrate his energies to a much greater advantage than he can when his attention is divided among several subjects. Each correlated group presents sufficient variety to avoid monotony. Another advantage of this method is that it greatly increases the amount of time which can be devoted to each subject.

A series of written, oral, and practical examinations on all the required subjects of medical instruction are distributed throughout the four years'

course of study. Every candidate for the degree of Doctor of Medicine must pass these examinations in a satisfactory manner, and also fulfil all the other requirements enumerated on page 45.

The degree of Doctor of Medicine cum laude is given to candidates who obtain an average of 80 per cent. or over, in all the required examinations.

Besides the required and elective courses in the regular system of instruction, there have been established numerous optional lecture and laboratory courses which prepare for, or supplement, many of the required subjects.

Pamphlets descriptive of the many Courses of Study for Graduates, and of the Summer Courses, may be obtained on application.

Inquiries may be addressed to the Dean of the Harvard Medical School, 688 Boylston Street, Boston, Mass.

ADMINISTRATIVE BOARD.

WILLIAM L. RICHARDSON, M.D., DEAN, and Professor of Obstetrics.
J. COLLINS WARREN, M.D., LL.D., Hon. F.R.C.S.. Professor of Surgery.

EDWARD S. WOOD, M.D., Professor of Chemistry.

FREDERICK C. SHATTUCK, M.D., Professor of Clinical Medicine.

WILLIAM F. WHITNEY, M.D., Curator of the Anatomical Museum.

CHARLES M. GREEN, M.D., SECRETARY, and Assistant Professor of Obstetrics.

CHARLES HARRINGTON, M.D., Assistant Professor of Hygiene.

FRANKLIN DEXTER, M.D., Associate Professor of Anatomy.

FRANK B. MALLORY, M.D.. Assistant Professor of Pathology.

Office Hours of the Dean, Tuesday and Friday, 12.15 to 1 p.m.; of the Secretary, Monday and Thursday. 12 to 1 p.m.

STANDING COMMITTEES.

Building.—Dr. Wood (Chairman), and Drs. W. L. Richardson and Whitney.

Advertising and Catalogue. — Dr. Wood (Chairman), and Drs. C. M. Green and Mallory.

Library.—Dr. Shattuck (Chairman), and Drs. Harrington and Dexter. Warren Museum.—Dr. Warren (Chairman), and Drs. Whitney and Dexter.

Fellowships. — Dr. Shattuck (Chairman), and Drs. Warren, Whitney, Harrington, and Mallory.

Scholarships. — Dr. W. L. Richardson (Chairman), and Drs. C. M. Green and Dexter.

INSTRUCTORS, LECTURERS, AND ASSISTANTS.*

JOHN HOMANS. M.D., Lecturer on Surgery.

EDWARD COWLES. M.D., LL.D., Clinical Instructor in Mental Diseases.

SAMUEL H. DURGIN, M.D., Lecturer on Hygiene.

HENRY H. A. BEACH, M.D., Lecturer on Surgery.

GEORGE W. GAY, M.D., Lecturer on Surgery.

JOHN H. McCOLLOM, M.D.. Instructor in Contagious Diseases.

ABNER POST, M.D., Instructor in Syphilis.

ELBRIDGE G. CUTLER, M.D., Instructor in the Theory and Practice of Physic.

THOMAS A. DE BLOIS, M.D., Clinical Instructor in Laryngology. EDWARD M. BUCKINGHAM. M.D., Clinical Instructor in Diseases of Children.

JOHN W. ELLIOT, M.D., Lecturer on Surgery.

JOHN W. FARLOW, M.D., Clinical Instructor in Laryngology.

CHARLES F. WITHINGTON, M.D., Instructor in Clinical Medicine.

SAMUEL J. MIXTER. M.D., Assistant in Operative Surgery.

GEORGE H. MONKS, M.D., Instructor in Clinical Surgery, and Assistant in Operative Surgery.

MYLES STANDISH, M.D., Assistant in Ophthalmology.

GEQRGE L. WALTON, M.D., Clinical Instructor in Diseases of the Nervous System.

FRANCIS S. WATSON, M.D., Instructor in Genito-Urinary Surgery. PHILIP COOMBS KNAPP, M.D., Clinical Instructor in Diseases of the Nervous System.

HERMAN F. VICKERY, M.D., Instructor in Clinical Medicine.

JOHN T. BOWEN, M.D., Instructor in Dermatology.

GEORGE HAVEN, M.D., Instructor in Gynaecology.

HENRY JACKSON, M.D.. Instructor in Clinical Medicine.

ALGERNON COOLIDGE, Jr., M.D., Clinical Instructor in Laryngology.

EDWARD B. LANE, M.D., Clinical Instructor in Mental Diseases.

JOHN C. MUNRO, M.D., Instructor in Surgery.

EDWARD REYNOLDS. M.D., Instructor in Obstetrics, and Assistant in Gynaecology.

FREDERICK E. CHENEY, M.D., Assistant in Ophthalmology.

CHARLES L. SCUDDER, M.D., Assistant in Clinical and Operative Surgery.

GEORGE G. SEARS, M.D.. Instructor in Clinical Medicine.

^{*} Arranged here and elsewhere in the Catalogue on the basis of collegiate seniority.

BENJAMIN TENNEY, M.D., Instructor in Anatomy.

EDWIN E. JACK, M.D., Assistant in Ophthalmology.

JAMES O. JORDAN, Ph.G., Assistant in Materia Medica.

PAUL THORNDIKE, M.D., Assistant in Genito-Urinary Surgery.

GEORGE A. CRAIGIN, M.D., Assistant in Diseases of Children.

JAMES G. MUMFORD, M.D., Assistant in Clinical and Operative Surgery.

WILLIAM H. PRESCOTT, M.D., Assistant in Clinical Medicine.

MALCOLM STORER, M.D., Assistant in Gynaecology.

FRANK ALBERT HIGGINS, M.D., Assistant in Obstetrics.

EDWARD H. NICHOLS, M.D., Demonstrator of Surgical Pathology.

JOHN L. AMES, M.D., Assistant in Clinical Medicine.

JOHN W. BARTOL, M.D., Assistant in Clinical Medicine.

JOHN B. BLAKE, M.D., Assistant in Clinical and Operative Surgery.

JAMES M. JACKSON, M.D., Assistant in Clinical Medicine.

HOWARD A. LOTHROP, M.D., Assistant in Anatomy.

JOHN L. MORSE, M.D., Instructor in Diseases of Children.

FRANKLIN G. BALCH, M.D., Assistant in Clinical and Operative Surgery.

ALLEN CLEGHORN, M.D., Assistant in Physiology.

EUGENE A. CROCKETT, M.D., Assistant in Otology.

EDWIN W. DWIGHT, M.D., Instructor in Legal Medicine, and Assistant in Clinical and Operative Surgery.

FRED B. LUND, M.D., Assistant in Clinical and Operative Surgery.

CHARLES A. PORTER, M.D., Instructor in Surgery.

EDWARD W. TAYLOR, M.D., Instructor in Neuropathology.

DAVID N. BLAKELEY, M.D., Assistant in Histology.

GEORGE W. W. BREWSTER, M.D., Assistant in Clinical and Operative Surgery.

RICHARD C. CABOT, M.D., Assistant in Clinical Medicine.

JOHN N. COOLIDGE, M.D., Assistant in Bacteriology.

J. BERGEN OGDEN, M.D., Instructor in Clinical Chemistry.

MARK W. RICHARDSON, M.D., Assistant in the Theory and Practice of Physic.

FARRAR COBB, M.D., Assistant in Clinical and Operative Surgery.

JOHN M. CONNOLLY, M.D., Assistant in Chemistry.

PHILIP HAMMOND, M.D., Assistant in Otology.

HENRY F. HEWES, M.D., Instructor in Clinical Chemistry.

ELLIOTT P. JOSLIN, M.D., Assistant in the Theory and Practice of Physic.

SIDNEY A. LORD, M.D., Assistant in Neurology.

CALVIN G. PAGE, M.D., Assistant in Bacteriology.

CHARLES J. WHITE, M.D., Assistant in Dermatology.

FRANKLIN W. WHITE, M.D., Assistant in the Theory and Practice of Physic.

JAMES H. WRIGHT, M.D., Instructor in Pathology. SEABURY W. ALLEN, M.D., Assistant in Anatomy. ERNEST A. CODMAN, M.D., Assistant in Anatomy. FRANCIS P. DENNY, M.D., Assistant in Bacteriology. WILLIAM H. ROBEY, JR., M.D., Assistant in Bacteriology. ALBERT P. MATHEWS, M.D., Instructor in Physiology. HARRIS P. MOSHER, M.D., Assistant in Anatomy. FRANKLIN S. NEWELL, M.D., Assistant in Obstetrics. HENRY J. PERRY, M.D., Assistant in Bacteriology. WILLIAM H. SMITH, M.D., Assistant in Clinical Medicine. ERNEST B. YOUNG, M.D., Assistant in Anatomy. GEORGE S. C. BADGER, M.D., Assistant in Physiological Chemistry and Assistant in the Theory and Practice of Physic. CHARLES S. BUTLER, M.D., Assistant in Anatomy. JAMES C. DONOGHUE, M.D., Assistant in Histology. RALPH C. LARRABEE, M.D., Assistant in Histology. HENRY O. MARCY, JR., M.D., Assistant in Anatomy. WILLIAM H. PARKER, Ph.D., Assistant in Physiology. FRANK RAYMOND STUBBS, M.D., Assistant in Histology. GEORGE S. WHITESIDE, M.D., Assistant in Anatomy. ALFRED W. BALCH, M.D., Assistant in Pharmacology. HUGH CABOT, M.D., Assistant in Operative Surgery. LINCOLN DAVIS, M.D., Assistant in Anatomy. EUGENE E. EVERETT, M.D., Assistant in Bacteriology. SHEPHERD I. FRANZ, Ph.D., Assistant in Physiology. MAYNARD LADD, M.D., Assistant in Physiological Chemistry, and Assistant in Diseases of Children. GEORGE B. MAGRATH, M.D., Assistant in Pathology. PERCY MUSGRAVE, M.D., Assistant in Chemistry. JOSEPH H. PRATT, M.D., Instructor in Pathology. FREDERICK W. STETSON, M.D., Assistant in Anatomy. FREDERICK A. WOODS, M.D., Assistant in Embryology. JOSEPH T. CALLAHAN, M.D., Assistant in Histology. FREDERICK H. VERHOEFF, M.D., Assistant in Pathology. WALTER B. CANNON, M.D., Instructor in Physiology. JOHN WARREN, M.D., Assistant in Anatomy.

AUSTIN TEACHING FELLOWS.

WALDEMAR KOCH, Ph.D., Assistant in Physiology.

HERBERT P. JOHNSON, Ph.D., in Comparative Pathology, ALBERT C. EYCLESHYMER, Ph.D., in Histology and Embryology. ROGER T. ATKINSON, M.D., in Histology and Embryology. JOSEPH D. WEIS, M.D., in Surgical Pathology.

THE MEDICAL SCHOOL.

ADMISSION OF STUDENTS.

Candidates for admission to this School must present a degree in Arts, Literature, Philosophy, or Science from a recognized college or scientific school, with the exception of such persons, of suitable age and attainments, as may be admitted by a special vote of the Faculty in each case.

Each candidate for admission is required to pass a written examination in Theoretical and Descriptive (Inorganic) Chemistry.

Each candidate is required to hand in, at the hour of the written examination in Chemistry, the original note-book in which he recorded the work performed by him in Qualitative Analysis. This note-book must give evidence that the student has had practice in the analysis of solutions and solids containing several salts, and must bear the endorsement of his teacher, certifying that the notes are a true record of the pupil's laboratory work.*

When a candidate shall give evidence of having passed a satisfactory examination in general chemistry and qualitative analysis, either at Harvard College or at the Lawrence Scientific School, a subsequent examination in those subjects will not be demanded for his admission to the Medical School.

Students conditioned in Chemistry at the examination for admission will be furnished, during the first year, with opportunities for making up this condition. A special fee of twenty dollars will be charged for this course.

No student will be permitted to take part in any exercise of the third class, or to present himself for examination in the subjects of that class, until deficiencies in general chemistry and qualitative analysis have been made up.

Applicants for admission to the Medical School who have studied three years in recognized colleges, technical, or scientific schools, in which courses in Human Anatomy, Physiology, Histology, and General Chemistry are a part of the instruction, may be admitted to advanced standing, provided they pass an examination in these subjects and possess the other requirements for admission.

* The Summer Courses of Instruction in the fundamental principles of Chemistry and in Qualitative Analysis given at Harvard College, and the Summer Course in General Chemistry and Qualitative Analysis given at the Medical School, are adapted to students about to enter the Medical School.

The admission examination in General Chemistry (at which time also the note-books in Qualitative Analysis must be handed in) is held at the Medical School, 688 Boylston St., Boston, at 12 o'clock noon on the Thursday following the last Wednesday in June, and on the Wednesday preceding the last Thursday in September. The examination is conducted in writing. Specimen examination papers may be found in the Medical School Catalogues.

DIVISION OF STUDENTS.

Students are divided into four classes according to their time of study and proficiency. No student may advance with his class, or be admitted to advanced standing, until he has passed the required examinations in the studies of the previous year, or a majority of them; nor may he become a member of the third class, until he has passed all the examinations of the first, including the admission examinations in Chemistry, and in addition to a majority of those of the second year; nor of the fourth class, until he has passed all the examinations of the first and second years, in addition to a majority of those of the third year.

No student will be permitted to take part in any exercise of the third year unless he is clear of entrance conditions in Chemistry.

No student will be permitted to continue his membership in the School, if at the beginning of his second year he has passed none of the first-year examinations.

In order that the time of study shall count as a full year, students of all classes must present themselves within the first week of the School year and register their names with the Secretary.

Students who began their professional studies in other recognized Medical Schools may be admitted to advanced standing; but all persons who apply for admission to the advanced classes must furnish a satisfactory certificate of time spent in medical studies, and must pass examinations in the branches already pursued by the class to which they seek admission, and fulfil all other requirements for admission.

Any student may obtain a certificate of his period of connection with the School.

DIVISION OF STUDIES.

FOR THE FIRST YEAR.	FOR THE SECOND YEAR.	FOR THE THIRD YEAR.	FOR THE FOURTH YEAR.	Electives.
*Anatomy (Practical).	*Bacteriology.	Theory and Practice. 3	Clinical Medicine. 3	Anatomy. 1
*Histology.	*Pathology. 3	Pediatrics. 2	Clinical Surgery. 2	Advanced Histology. 1
Physiology. 3	Anatomy. 2	Surgery (written 2 hrs., practical 1 mr.) 3	*Orthopedics.	Histology of the Nervous System.
Physiological Chemistry. $1\frac{1}{2}$	Clinical Chemistry. 2	Obstetrics. 3	*Syphilis.	Embryology. 1
Optional courses in above subjects.	Materia Medica and Therapeutics.	Gynaecology. 1	*Ophthalmology.	Physiology. 1
	Optional Courses in Pathology.	Dermatology. 1	*Otology.	Physiological Chemistry. 2
	Theory and Practice.	Neurology. 1	*Laryngology. 1	Clinical Chemistry. 1
	Clinical Medicine.	Psychiatry. 1	*Legal Medicine. · 1	Bacteriology. 1
	Auscultation and Percussion.	Clinical Medicine.	Hygiene.	Comparative Etiology of Infectious Discases.
	Surgery.	Clinical Surgery.	Clinical Microscopy.	Clinical Microscopy. 1
	Clinical Surgery.	And the same and t	Genito-urinary Surgery.	Operative Surgery. 1
The state of the s			Ovarian tumors.	† Orthopedies. 2
			Psychiatry.	*Operative Obstetrics. 1
			Municipal Sanitation.	Gynaecology. 2
				Dermatology. 2
	The state of the s	designmentations destributions approximates constructions that the second secon		Neurology. 2
				Ophthalmology (pract.) 1
				† Otology. 2
And a contract of the contract				Hygiene.

Note:—Subjects in which an examination is required are in roman letters. The number following name of examination indicates the length in hours of the examination. In the fourth year, electives must be chosen whose examinations shall aggregate three hours.

* Examination in February.

METHODS OF INSTRUCTION.

The following methods of instruction are adopted in the several departments:—

Note. — The figures at the right of the page indicate as accurately as can be ascertained the number of hours of instruction which each student receives in the different courses.

ABBREVIATIONS USED IN THE FOLLOWING PAGES, AND IN THE TABULAR VIEWS.

B.C.H. = Boston City Hospital. B.D. = Boston Dispensary.

B.I.H. = Boston Insane Hospital (Pierce and Austin Farms).

B.L.H. = Boston Lying-In Hospital.

Ch.H. = Children's Hospital.

E. and E.I. = Massachusetts Charitable Eye and Ear Infirmary.

H.M.S. = Harvard Medical School.

I.H. = Infant's Hospital.
L.I.H. = Long Island Hospital.
McL.H. = McLean Hospital.

M.G.H. = Massachusetts General Hospital.

S.D.B.C.H. = South Department, Boston City Hospital.

S.O.P.D. = Surgical Out Patient Department.

Anatomy.

THOMAS DWIGHT, M.D., LL.D., Parkman Professor of Anatomy.

Franklin Dexter, M.D., Associate Professor of Anatomy.

WILLIAM A. BROOKS, JR., M.D., Demonstrator of Anatomy.

BENJAMIN TENNEY, M.D.. Instructor in Anatomy.

HOWARD A. LOTHROP, M.D., Assistant in Anatomy.

SEABURY W. ALLEN, M.D., Assistant in Anatomy.

ERNEST AMORY CODMAN, M.D., Assistant in Anatomy

HARRIS P. MOSHER, M.D., Assistant in Anatomy.

Ernest B. Young, M.D., Assistant in Anatomy.

Charles S. Butler, M.D., Assistant in Anatomy.

HENRY O. MARCY, JR., M.D., Assistant in Anatomy.

George S. Whiteside, M.D., Assistant in Anatomy.

LINCOLN DAVIS, M.D., Assistant in Anatomy.

Frederick Winslow Stetson, M.D., Assistant in Anatomy.

JOHN WARREN, M.D., Assistant in Anatomy.

First year.—The instruction consists of lectures; various practical exercises, including abundant dissection under the direction of the Associate Professor; recitations; and demonstrations. The means and methods of illustrating the anatomical lectures probably are unrivalled in this country. The system of demonstrations to small sections has been greatly extended.

Second year. — Much use is made of frozen sections and of the living model.

Fourth year. — There is an elective course in the dissecting room. The Demonstrator will furnish the details upon application.

Text-books. — Gray. Morris. Quain. Cunningham. Gerrish. Dwight, Frozen Sections of a Child. Treves, Applied Anatomy. Dexter, Anatomy of the Peritoneum.

Collateral Reading.—Testut. Anatomie Humaine. Tillaux, Anatomie topographique. Holden, Osteology. Humphry, Human Skeleton. Morris, on the Joints.

FIRST YEAR.

October.

Lectures.	Professo	r Dwight.	Daily.		24
Demonstrat	ions and	study of bor	nes and joints.	Three hours of	lailu. 79

November and December.

Lectures.	Profes	sor Di	VIGHT.	Turce a wee	κ .	•				16
Demonstra	tions.	Asso.	Professor	r Dexter.	Four	times	α	week	to	each
section	of the	class.								32

Practical	anatomy	with	recitations.	Three	hours	α	day.	fire	times	α
week									1.	20

January.

Leetures	and demonstrations.	Professor Dwight.	Every Saturday.	4
Loginies	Asso Professor D	EXTER Daily		94

Demonstrations.	Dr.	Brooks.	Fire	times a	week t	to each	section	of	the
class.									20

Demonstrations	and study of	the brain	and organs of	sense. Three	hours
a day, five	times a week.				60

Practical anatomy	with	recitations.	Three	hours	a	day,	fire	times a
week.								60
		Man	/•					

Optional course. Afternoons, daily.

SECOND YEAR.

February and March.

Lectures. Professor Dwight. Eight times a week, in sections.

FOURTH YEAR.

February, March, and April.

Elective course. Dr. Brooks.

Histology and Embryology.

Charles S. Minot, S.D., LL.D., Professor of Histology and Human Embryology.

DAVID N. BLAKELEY, M.D., Assistant in Histology.

James C. Donoghue, M.D., Assistant in Histology.

RALPH C. LARRABEE, M.D., Assistant in Histology.

FRANK R. STUBBS, M.D., Assistant in Histology.

Frederick A. Woods, M.D., Assistant in Embryology.

JOSEPH T. CALLAHAN, M.D., Assistant in Histology.

Albert C. Eycleshymer, Ph.D., Austin Teaching Fellow in Histology and Embryology.

ROGER T. ATKINSON, M.D., Austin Teaching Fellow in Histology and Embryology.

LABORATORY.

The laboratory comprises a general class room with places for ninety men, and four smaller rooms for the officers of instruction, advanced workers, and for the library and collections. There are 215 microscopes for students' use, which are let to students for three dollars a term. There are over 13,000 permanent preparations used in the class work, a histological collection illustrating most of the features of the microscopic structure of the higher animals, and an embryological collection which includes nearly three hundred embryos of various selected vertebrates cut into serial sections, and thoroughly catalogued. There are also wax and paper models for use in the course of instruction. The library comprises several complete sets of important special journals including series deposited by the professor in charge. A card catalogue is maintained, which gives access to the literature of embryology and histology.

The equipment includes numerous microtomes, most of the leading patterns being represented, and many other pieces of apparatus, offering altogether ample facilities for elementary and advanced work and for investigation.

Text-books. — Stöhr, Manual of Histology. Piersol, Histology. Schaefer, Essentials of Histology.

Collateral Reading. — Quain, Anatomy. Lee, Microtomist's Vademecum. Kölliker, Gewebelehre. Minot, Human Embryology. Marshall, Vertebrate Embryology.

REGULAR COURSES.

First year. — Histology is taught by lectures and laboratory work; twenty-two hours a week are required during October, November, and December, and sixteen hours during January. Every student is recom-

mended to purchase a microscope, but microscopes may be rented, by those who do not possess them, for three dollars a term.

Fourth year. — Three elective courses are offered, (a) Embryology, (b) Advanced Histology, (c) The Histology of the Nervous System. Each of these courses occupies ten hours a week during the second term.

FIRST YEAR.

October.

Lectures. Professor Minot. Six times a week. 24
Laboratory work. Drs. Donoghue, Larrabee, Stubbs, Atkinson,
Woods, and Callahan. Three hours, five times a week. 60

November and December.

Lectures. Professor Minot. Twice a week.

16
Laboratory work. Four hours, four times a week: three hours, once a week.

72

January.

FOURTH YEAR ELECTIVES.

Lectures. Professor MINOT.

16

(a) Embryology. Professor Minot, and Drs. Atkinson and Woods.

- Ten hours a week, second half-year.

 (b) Advanced Histology. Professor Minot, and Drs. Atkinson and Woods. Ten hours a week, second half-year.

 160
- (c) Histology of the Nervous System. Professor Minot, and Drs. Atkinson and Woods. Ten hours a week, second half-year. 160

GRADUATE COURSES.

I. Professor Minot, with Dr. F. A. Woods, will give a course of thirty-two exercises on Elementary Human Embryology for practitioners. This course can be extended by a supplementary course of the same length. Fee, \$25.

Graduates taking these courses will be allowed the privilege of the Histological Laboratory. There will be an additional charge of \$5 for reagents and material.

II. Professor Minor with Dr. Woods will give a course intended for persons who wish to make a special study of Vertebrate or Human Embryology. This course is open to registered students of the Graduate Department of the Faculty of Arts and Sciences, and will be offered hereafter also as a special course to graduate students of the Medical School.

This course will extend through the entire year, but in two parts of one term each. The resources of the Embryological Laboratory in apparatus

and material render it possible to offer unusually favorable opportunities for both general study and special research. The course is arranged for those who, as morphologists, anatomists, and practitioners, wish to give the principal part of their time for one or more school terms to the subject. It will cover the whole field of Embryology, including the genital products, the theories of heredity and sex, the formation of the germ-layers, differentiation of the organs, the history of the placenta and the general morphology of Vertebrates or of Man. Most of the work will be done by the student in the laboratory, but there will also be formal lectures. Students taking this course will be expected to devote to it not less than eighteen hours a week.

Fee, for one term, \$75. Two terms, \$125.

The above courses I and II will be limited to twelve students in each course.

INVESTIGATION.

Special accommodations are furnished in the laboratory for students who wish to pursue special or advanced work. Special facilities are offered to original investigators, who will receive such personal aid as may be necessary or advantageous.

A special course in vertebrate embryology is given during the second term; this has been accepted by the Faculty ef Arts and Sciences, and is open to students of the academic departments.

Physiology.

Henry P. Bowditch, M.D., LL.D., D.Sc., Professor of Physiology.
William T. Porter, M.D., Associate Professor of Physiology.
Allen Cleghorn, M.D., Assistant in Physiology.
Albert Mathews, M.D., Instructor in Physiology.
William H. Parker, Ph.D., Assistant in Physiology.
Shepherd Ivory Franz, Ph.D., Assistant in Physiology.
Walter B. Cannon, M.D., Instructor in Physiology.
Waldemar Koch, B.S., Ph.D., Assistant in Physiology.

First year. — The instruction in Physiology consists of from two to three hours of laboratory experiments daily during four months, of lectures or recitations on the work of the day, and of theses written by the students from the original sources and discussed by students and instructors. The instruction begins with a course in the physiology of nerve and muscle, which is made as thorough as possible in order that the student at the outset may be grounded well in the field which is best adapted to give him the point of view of the physiologist and which forms the best foundation for further work. Then tollows a general survey of the whole science, exclusive of those portions covered by the courses in

anatomy and physiological chemistry. Finally, advanced elective courses are offered; each of these covers thoroughly a sufficiently limited subject: the student may select the subjects which most interest him, but is required to choose not less than twenty-four half days' work. general method of instruction may be illustrated by the programme for a day. The subject of the day is, for example, the control of the heart through the vagus nerve; from 9 to 11.30 A.M. each student investigates for himself the action of the vagus nerve on the heart of a frog, arranges his graphic records of the heart-beat in his laboratory note-book, adds notes of his observations, reads the collateral information set before him on printed sheets (abstracts of the work of the original investigators), and studies the preparations, graphic records, etc., furnished from the collections of the department. At 11.30 the entire class meets to hear a thesis on the vagus nerve read by some member of the class who has made a careful study from the original sources; the discussion which follows is carried on by the students and is closed by the instructors. At 12 o'clock a brief lecture or a recitation commented on by one of the instructors. and illustrated by demonstrations, adds whatever information seems necessary to complete the subject.

Fourth year. — An elective laboratory course in Advanced Physiology is offered.

Text-books. — Foster, Text-book of Physiology. American Text-book of Physiology. Waller, Human Physiology.

Collateral Reading. — Hermann, Lehrbuch der Physiologie. Kirke, Handbook of Physiology. Fick, Compendium der Physiologie. Halliburton, Text-book of Chemical Physiology and Pathology. McGregor-Robertson, Elements of Physiological Physics. Landois, Manual of Human Physiology. Stirling, Practical Physiology. Gamgee, Physiological Chemistry of the Animal Body.

FIRST YEAR.

Lectures. Professors Bowditch and W. T. Porter. Daily, for 45 minutes, second half-year. 72

Laboratory exercises. Professor W. T. Porter, and Drs. Cleghorn, Mathews, Franz, Cannon, and Koch. Daily, second half-year. 252

Conferences. Daily, for half an hour, second half-year. 36

Optional courses. (To be announced later.) Afternoons during May. 72

FOURTH YEAR ELECTIVE.

Advanced Physiology. Professors Bowditch and W. T. Porter. Twice a week, second half-year.

Chemistry.

Edward S. Wood, M.D., Professor of Chemistry.

William B. Hills, M.D., Associate Professor of Chemistry.

J. Bergen Ogden, M.D., Instructor in Clinical Chemistry.

John M. Connolly, M.D., Assistant in Chemistry.

Henry F. Hewes, M.D., Instructor in Clinical Chemistry.

George S. C. Badger, M.D., Assistant in Physiological Chemistry.

Maynard Ladd, M.D., Assistant in Physiological Chemistry.

Percy Musgrave, M.D., Assistant in Chemistry.

First year. — The course in Physiological Chemistry extends through twelve weeks and consists of five lectures, demonstrations, or recitations, and of five laboratory exercises of at least three hours' duration a week. The course is so arranged that the student is enabled to conduct his laboratory work on the various subjects included in the course in direct connection with the lecture room instruction.

The subjects studied in this course are the carbohydrates; the proteids, their composition, relationships, chemical properties, methods of precipition and separation; the fats; the chemistry of epithelial, connective, muscular, and nervous tissues; the chemistry of digestion; bile; blood; lymph; milk; and urine.

Special attention is given to the study of the urine. Each student examines, chemically and microscopically, a large number of specimens, and becomes thoroughly familiar with the composition of this secretion in normal and pathological conditions, and with the best methods for the detection of pathological constituents. The best methods for the quantitative determination of the more important normal and pathological constituents of the urine are also taught.

Second year. The instruction in Chemistry is chiefly clinical in character. Each student is drilled thoroughly in the diagnosis of kidney and other diseases from the examination of pathological urines obtained daily from the hospitals. The class in sections receives practical instruction in the clinical examination of the blood and of gastric contents, and is taught the medico-legal examination of blood and other stains, the analysis of pathological concretions and fluids, and clinical toxicology.

Fourth year.—In the elective in Physiological Chemistry the students analyze urine, bile, gastric juice, bone, muscle, adipose tissue, and faeces as obtained in health and in disease. They extract and isolate the more important constituents present. In the same way they study various pathological fluids and concretions.

The Chemical Laboratory at the Massachusetts General Hospital is open for original research in experimental medicine.

In Clinical Chemistry the elective consists of: (a) Urine, (b) Medicolegal Chemistry, i.e. examinations of poisons, blood, and other stains, (c) Clinical Examination of the Blood. Each student must work 128 hours in the laboratory on one or more of these branches.

Text-books. — Hammarsten, Physiological Chemistry. Ogden, Clinical Examination of the Urine. Tyson, Practical Examination of Urine. Wharton and Stillé, Medical Jurisprudence, Vol. II., on Poisons.

Collateral Reading. — Halliburton, Text-book of Chemical Physiology and Pathology. Stirling, Practical Physiology. Gamgee, Physiological Chemistry of the Animal Body. Novy, Laboratory Work in Physiological Chemistry. Roberts, Urinary and Renal Diseases. Purdy, Practical Urinalysis and Urinary Diagnosis. Taylor on Poisons. Lea, Chemical Basis of the Animal Body (appendix to Foster's Text-book of Physiology). Vaughan and Novy, Ptomaines and Leucomaines.

PHYSIOLOGICAL CHEMISTRY.

FIRST YEAR.

Lectures and demonstrations. Professor Hills. Daily, except Saturdays, during February, March, and April. 60

Ladoratory exercises. Professor Hills, and Drs. Connolly, Badger, Ladd, and Musgrave. Daily, except Saturdays, for two and one-half hours during February, March, and April. 150

FOURTH YEAR ELECTIVE.

Laboratory work. Dr. Pfaff. (M.G.H.) Two half-days a week throughout the year. 256

CLINICAL CHEMISTRY.

SECOND YEAR.

Lectures, demonstrations, and conferences. Professor Wood. Four hours a week, second half-year.

Laboratory exercises. Professor Wood, and Drs. Ogden, Connolly, Badger, Ladd, and Musgrave. Eight hours a week, second half-year.

FOURTH YEAR ELECTIVE. (128 hrs.)

- (a) Urine. Professor Wood and Dr. Ogden First half-year.
- (b) Medico-legal Chemistry. Professor Wood and Dr. Ogden. First half-year.
- (c) Clinical Examination of the Blood and Gastric Contents. Professor Wood and Dr. Hewes. First half-year.

Bacteriology.

HAROLD C. ERNST, M.D., Professor of Bacteriology.

JOHN N. COOLIDGE, M.D., Assistant in Bacteriology.

CALVIN G. PAGE, M.D.. Assistant in Bacteriology.

Francis P. Denny, M.D., Assistant in Bacteriology.

WILLIAM HENRY ROBEY, JR., M.D., Assistant in Bacteriology

HENRY J. PERRY, M.D., Assistant in Bacteriology.

EUGENE E. EVERETT, M.D., Assistant in Bacteriology.

Second year. — Required bacteriology is taught by lectures and practical laboratory work. The lectures treat of the general subject and of methods of practical work. In the laboratory each student has an opportunity to become familiar with the simpler methods of manipulation and staining which are of especial clinical value, and with the more prominent of the pathogenic bacteria.

Fourth year. — The elective course offered is mainly practical.

Opportunities for special investigation will be offered such students as can give the necessary time in the laboratory.

Text-books. — Muir and Ritchie. Abbott. Park.

Collateral Reading. — Sternberg. Heim. Migula.

SECOND YEAR.

Lectures. Professor Ernst. Daily, except Saturdays, during October and November.

Laboratory work. Professor Ernst, and Drs. Coolidge, Page, Denny, Rober, and Perry. Two to three hours daily during October and November.

FOURTH YEAR ELECTIVE.

Advanced Bacteriology. Professor Ernst, and Drs. Coolidge, Page, Denny, Roby, and Perry. Lectures and laboratory work during the second half-year. (This course is intended to encourage original work. The amount of time to be devoted to it has not yet been determined.)

Pathology.

William T. Councilman, M.D., Shattuck Professor of Pathological Anatomy.

Frank B. Mallory, M.D., Assistant Professor of Pathology.

James H. Wright, M.D., Instructor in Pathology.

George B. Magrath, M.D., Assistant in Pathology.

Joseph H. Pratt, M.D. Instructor in Pathology.

Frederick H. Verhoeff, M.D., Assistant in Pathology.

Second year. — The course in Pathology consists of laboratory work, demonstrations, conferences, and lectures. During the forenoons of

October and November a course in general pathology is given. The basis of the work is formed by a laboratory course in which microscopic work is combined with demonstrations and examinations of gross specimens. A lecture with stereopticon demonstrations is given daily at the end of the exercises in order to explain more fully the lesions studied in the laboratory.

During the forenoons of December and of the first and second weeks of January the work consists chiefly of the study and diagnosis of tissues from post-mortem examinations. So far as possible all the organs from a cadaver are demonstrated together, and the relation of the lesions explained. The organs are examined by the naked eye, and microscopically in frozen sections. Tumors and other pathological products are examined in the same way. An abundance of material can be provided for the course. Lectures and laboratory talks are given daily.

During December and January three optional courses are offered, at least one of which each student is expected to attend. No restrictions are placed on the number of courses a student may attend.

These courses are :-

- (a) Sixteen demonstrations and laboratory exercises on the pathology of the nervous system. (See Neurology.)
- (b) Twenty laboratory exercises in surgical pathology. (See Surgery.)
- (c) Lectures and demonstrations in the pathology of certain parasitic diseases.

Text-books. — Ziegler, General and Special Pathology. Stengel, A Text-book of Pathology. Mallorv and Wright, Pathological Technique. Collateral Reading. — Thoma, Pathologische Anatomie. Orth, Pathologische Anatomie; Diagnostik. Ribbert, Pathologische Histologie.

SECOND YEAR.

Lectures or conferences. Professor Councilman. Daily for fourteen weeks, October, November, December, and January. 84

Laboratory work. Professor Councilman, Asst. Professor Mallory, and Drs. Wright, Magrath, Pratt, and ——. Three hours daily during the forenoons of October, November. December and the first two weeks of January.

Optional course (a). Dr. Taylor. Afternoons in December.

Optional course (b). Dr. Nichols. Afternoons in January.

Optional course (c). Dr. Smith. Forenoons of the third and fourth weeks in January.

Comparative Pathology.

Theobald Smith, M.D., George Fabyan Professor of Comparative Pathology.

Herbert P. Johnson, Ph.D., Austin Teaching Fellow in Comparative Pathology.

The laboratory is open from October to June to a limited number of men qualified to do original research work. Instruction is given by means of lectures upon selected subjects and by laboratory exercises.

Fourth year. — An elective course consisting of lectures and demonstrations on the comparative etiology of infectious diseases is given during the second term. In this course much time is devoted to the discussion of the general principles underlying infection and immunity, and to public health problems arising from infectious diseases of animals.

FOURTH YEAR ELECTIVE.

Lectures. Professor Smith. (H.M.S.) Twice a week, second halfyear. 32

Materia Medica and Therapeutics.

Franz Pfaff, M.D., Assistant Professor of Pharmacology and Therapeutics.

James O. Jordan, Ph.G., Assistant in Materia Medica. Alfred W. Balch, M.D., Assistant in Pharmacology.

Second year.—Instruction is given by lectures and recitations, and by demonstrations of the physiological action of drugs. The lectures are supplemented by an optional course in practical pharmacy, in which the compounding of prescriptions is illustrated. In addition to the lectures on therapeutics, the practical relation of remedies to diseased conditions is dwelt on in the exercises in the departments of Theory and Practice, and of Clinical Medicine.

A special laboratory has been equipped for original research in Experimental Pharmacology and Therapeutics; here a voluntary course, open to a limited number of duly qualified undergraduates, affords opportunity for practical training and instruction in the methods and use of the special apparatus employed in determining the toxic and physiological actions of drugs, and their practical value as remedies.

Text-book. — A. R. Cushny, Pharmacology and Therapeutics.

Collateral Reading. — Schmiedeberg, Arzneimittellehre. Binz, Vorlesungen ueber Pharmacologie. H. C. Wood, Therapeutics. Brunton, Pharmacology, Materia Medica, and Therapeutics.

SECOND YEAR.

Lectures. Dr. Pfaff. Four times a week, Feb. to May inclusive. 64
Voluntary laboratory work. Mr. Jordan and Dr. Balch. In sections,
two hours a week during April and May.

The Theory and Practice of Medicine.

- REGINALD H. Fitz., M.D., Hersey Professor of the Theory and Practice of Physic.
- Elbridge G. Cutler, M.D., Instructor in the Theory and Practice of Physic.
- MARK W. RICHARDSON, M.D., Assistant in the Theory and Practice of Physic.
- ELLIOTT P. Joslin, M.D., Assistant in the Theory and Practice of Physic.
- Franklin W. White, M.D., Assistant in the Theory and Practice of Physic.
- George S. C. Badger, M.D., Assistant in the Theory and Practice of Physic.

Second year. — The instruction will be given chiefly by means of clinical teaching, for which purpose the class will be divided into small sections.

Third year. — Lectures on selected topics are given at the Medical School. At the Massachusetts General Hospital there are clinical exercises in which the students are called upon to take an active part. Opportunities also are offered for bedside visits, for the examination of ambulatory patients, and for the discussion of the conclusions reached in regard to the cases examined.

Text-books. — Osler, Practice of Medicine. Tyson, Practice of Medicine. Strümpell, Text-book of Medicine.

Collateral Reading. — Pepper, System of Practical Medicine by American Authors. Loomis-Thompson, American System of Practical Medicine. Allbutt, System of Medicine. Eulenburg, Real-Encyclopädie der gesammten Heilkunde.

SECOND YEAR.

Clinical lectures. Dr. Cutler. (M.G.H.) Three times a week second half-year.

THIRD YEAR.

- Lectures on selected subjects. Professor Fitz. (H.M.S.) Twice a week.
- Clinical lectures. Professor Fitz. (M.G.H.) Twice a week. 64
- Clinical lectures. Dr. Cutler. (M.G.H.) Twice a week, first half-year. 32

Clinical Medicine.

Frederick C. Shattuck, M.D., Jackson Professor of Clinical Medicine.

JOHN H. McCollom, M.D., Instructor in Contagious Diseases.

CHARLES F. WITHINGTON, M.D., Instructor in Clinical Medicine.

HERMAN F. VICKERY, M.D., Instructor in Clinical Medicine.

Henry Jackson, M.D., Instructor in Clinical Medicine.

GEORGE G. SEARS, M.D., Instructor in Clinical Medicine.

WILLIAM H. PRESCOTT, M.D., Assistant in Clinical Medicine.

JOHN L. AMES, M.D., Assistant in Clinical Medicine.

JOHN W. BARTOL, M.D., Assistant in Clinical Medicine.

JAMES M JACKSON, M.D., Assistant in Clinical Medicine.

RICHARD C. CABOT, M.D., Assistant in Clinical Medicine.

WILLIAM H. SMITH, M.D., Assistant in Clinical Medicine.

The study of Clinical Medicine begins with the second half of the second year. Daily instruction is given by clinical lectures, hospital visits, and other exercises. The teaching for the second, third, and fourth years is graded and separate for each year, except that students of the fourth class are allowed to attend the clinical lectures given for the third class, if they wish.

Second year. — The following courses continue for four months: —

Physical diagnosis for the class in small sections. Every student attends two exercises a week.

Clinical Instruction for the entire class, twice a week, in case taking, diagnostic methods, and diagnosis.

Third year. — Four exercises a week are held in the hospital amphitheatres and wards. The teaching is more advanced and includes therapeutics. The amount of clinical material is so large that during the year a wide range of diseases is illustrated practically. Even of the rarer affections often several examples are shown.

Fourth year.—The class has two clinics a week at which special attention is paid to Clinical Therapeutics.

Conferences are held once a week throughout the year. A medical case is assigned to every student. He is required to work it up thoroughly and to write out in full the history, physical examination, differential diagnosis, and treatment. From the papers thus prepared certain ones are selected to be read before the teachers in the department and the students at the weekly conference. A full discussion is encouraged.

Every student also is required, under the supervision of one of the assistants in the department, to attend four dispensary cases, to guide their treatment, and to write brief reports on them.

In the second half-year the class, divided into sections of ten, is given an opportunity to become practically familiar with diphtheria, searlet fever, and measles, their diagnosis, course, and treatment. This exceptional opportunity is rendered possible by the opening of the new "South" or Contagious Department of the Boston City Hospital, which accommodates two hundred and fifty patients.

Twice a week in the second half-year the entire class has a practical exercise in clinical diagnosis. Several students are assigned a case at each exercise, report upon it, and are criticised by the instructor in charge.

Text-books. — Osler, Practice of Medicine. Tyson, Practice of Medicine. Strümpell, Text-book of Medicine. Wood and Fitz, Practice of Medicine. Musser, Medical Diagnosis. Flint, Manual of Percussion and Auscultation. Tyson, Physical Diagnosis.

Collateral Reading. — Allbutt, System of Medicine. Loomis-Thompson, American system of Practical Medicine. Twentieth Century Practice of Medicine. Fagge and Pye-Smith, Practice of Medicine. Gowers, Diseases of the Nervous System.

SECOND YEAR.

- Clinics. Dr. Vickery (M.G.H.), and Dr. Sears (B.C.H.) Twice a week, second half-year.
- Physical Diagnosis. Drs. Cabot and J. M. Jackson (M.G.H.). Drs. Ames and Bartol (B.C.H.), and Dr. Prescott (B.D.). Two exercises a week for each student.

THIRD YEAR.

- Clinics. Professor Shattuck. (M.G.H.) Twice a week. 64
 Dr. Sears. (B.C.H.) Once a week, first half-year. 16
 - Dr. WITHINGTON. (B.C.H.) Once a week, second half-year. 16
- Medical visits. Drs. G. B. Shattuck, Withington, Williams, H. Jackson, Sears, Ames and Bartol (B.C.H.). Once a week. 32

FOURTH YEAR.

- Clinics with special reference to therapeutics. Professor Shattuck.
 - (M.G.H.) Once a week
 Dr. Sears. (B.C.H.) Once a week, first half-year.

 16
 - Dr. Withington. (B.C.H.) Once a week, second half-year. 16
- Dr. Withington. (B.C.H.) Once a week, second half-year. 16 Clinical conferences. (H.M.S.) Once a week. 32
- Contagious diseases and practical diagnosis. (Optional course.) Dr. McCollom. (S.D.B.C.H.) Two visits (one and one-half to two hours) for each student.

Practical exercises in clinical diagnosis. Dr. R. C. Cabot. (M.G.H.)

Twice a week for two hours, second half-year.

Once a week, second half-year.

32

Pediatrics.

THOMAS M. ROTCH, M.D., Professor of the Diseases of Children.

JOHN H. McCollom, M.D., Instructor in Contagious Diseases.

Edward M. Buckingham, M.D., Clinical Instructor in Diseases of Children.

George A. Craigin. M.D.. Assistant in Diseases of Children. John L. Morse, M.D., Instructor in Diseases of Children. Maynard Ladd. M.D.. Assistant in Diseases of Children.

Third year. — The instruction in this department is given by lectures, recitations, conferences, and sectional teaching at the bedside. During the first half-year the class in sections receives instruction three times a week in the contagious wards of the Boston City Hospital where each student is shown and examines cases of diphtheria, scarlet fever, and measles. He also is taught the technique of intubation. Each student is required to make a written report of the cases which he sees. In the course of the year each student also is required to see two sick children either in their homes or in the hospital, to continue seeing the cases until the sickness is over, and to report on them in writing.

Text-book. — Rotch. Pediatrics

Collateral Reading.—Keating, Clyclopaedia of the Diseases of Children. Northrup, American Edition of The Diseases of Children, by Ashby and Wright. Jacobi, Therapeutics of Infancy and Childhood. Holt. Diseases of Infancy and Childhood. Sachs, The Nervous Diseases of Children.

THIRD YEAR.

Lectures. Professor Rotch. (H.M.S.), (I.H.), or North Grove St.

Twice a week during October and November.

Once a week during December, January, February, and March.

Clinics including some sectional teaching. Professor Rotch. (I.H.).

Once a week during December, January, February, and March.

Clinics. Dr. Buckingham. (Ch.H.). Once a week during October and March.

Recitations including Conferences and Case Teaching. Dr. Morse.

(H.M.S.). and North Grove St. Once a week during December, January, February, and March.

Three times a week during April and May.

Sectional teaching. Dr. Buckingham. (Ch.H). Twice a week during October and November.

Three times a week during December and January.

Once a week duving February and March.

Dr. Craigin. (Ch.H.) Twice a week, October to March inclusive.
Once a week in April.

Dr. McCollom. (S.D.B.C.H.) Three times a week, first half-year. Each student receives approximately 8 hours of sectional teaching.

Clinical Microscopy.

WILLIAM F. WHITNEY, M.D., Curator of the Anatomical Museum.

Fourth year. — The course during the first half-year is optional. A similar course is given during the second half-year as an elective. The instruction is entirely practical in character. It includes the examination of fluids, tumors, curettings, and organs from autopsies. Special attention is paid to the microscopic examination of the material in the fresh condition.

Text-book. - Simon, Manual of Clinical Diagnosis.

FOURTH YEAR. OPTIONAL COURSE.

Laboratory exercises. Dr. Whitney, (H.M.S.) One hour, three times a week, first half-year.

ELECTIVE.

Laboratory exercises. Dr. Whitney. (H.M.S.) One hour, three times a week, second half-year.

Surgery.

J. Collins Warren, M.D., LL.D., Moseley Professor of Surgery.

EDWARD H. BRADFORD, M.D., Assistant Professor of Orthopedics.

Herbert L. Burrell, M.D., Assistant Professor of Surgery.

John Homans, M.D., Lecturer on Surgery.

George W. Gay, M.D., Lecturer on Surgery.

Francis S. Watson, M.D., Instructor in Genito-Urinary Surgery.

John C. Munro, M.D., Instructor in Surgery.

Paul Thorndike, M.D., Assistant in Genito-Urinary Surgery.

Edward H. Nichols, M.D., Demonstrator of Surgical Pathology.

Charles A. Porter, M.D., Instructor in Surgery.

Joseph D. Weis, M.D., Austin Teaching Fellow in Surgical Pathology.

Instruction is given by systematic lectures, recitations, clinical demonstrations, and laboratory exercises.

Second year. — During the month of January there are twenty laboratory exercises in Surgical Pathology. This course includes the healing of wounds and fractures, the diseases of bones and joints, and the special pathology which is of surgical importance. In connection with the course a series of twelve clinical lectures illustrating the lesions studied is given at the Boston City Hospital.

During the second half-year thirty-two recitations and demonstrations in Surgical Pathology are held at the Medical School and at the Massachusetts General Hospital.

Exercises on the application of surgical apparatus and on bandaging are given in the laboratory to the class in sections. The mechanical treatment of each variety of fracture is illustrated, and the student himself applies the apparatus. The different forms of bandages, including all fixed protective dressings in which silicate of potash, dextrine, and plaster of paris are employed, are applied by each student under critical supervision. The apparatus used in the preparation of surgical dressings is explained in detail.

Third year. — Systematic lectures and recitations, in the proportion of three to one, are given twice a week throughout the year at the Medical School. A clinical demonstration is made once a week at the Massachusetts General Hospital in connection with these lectures.

Fourth year. — The following instruction is given: —

A required course in Orthopedic Surgery. The instruction consists of lectures at the Medical School and of clinical exercises at the Children's Hospital.

An elective course in Orthopedic Surgery, consisting entirely of clinical work.

An optional course in Genito-Urinary Surgery, consisting of lectures at the Medical School, and of clinical demonstrations at the Boston City Hospital.

An optional course of systematic lectures on Ovarian Tumors.

Surgical Operations of every variety are performed once a week both at the Massachusetts General and at the Boston City Hospitals.

Text-books. — An American Text-book of Surgery. International Text-book of Surgery. Warren, Surgical Pathology.

Collateral Reading.— Cheever, Lectures on Surgery. Dennis, System of Surgery. Roswell Park, Surgery. Wharton and Curtis. Practice of Surgery. Treves, System of Surgery. Stephen Smith, Operative Surgery. Treves, Manual of Operative Surgery. DaCosta, Modern Surgery. Waring, Manual of Operative Surgery.

SECOND YEAR.

- Laboratory course in Surgical Pathology. Dr. Nichols. (H.M.S.)

 Twenty two-hour exercises during January.

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- Clinical lectures in connection with the above course. Asst. Professor Burrell. (B.C.H.) Twelve exercises during January. 12
- Recitations and demonstrations in Surgical Pathology. Dr. C. A. PORTER. (H.M.S. and M.G.H.) Thirty-two exercises, second half-year. 32
- Application of bandages and apparatus. Dr. Munro. Twelve hours for each student.

THIRD YEAR.

- Lectures and recitations. Professor Warren and Asst. Professor Burrell. (H.M.S.) Twice a week. 64
- Clinical demonstrations in connection with above lectures. Professor Warren. (M.G.H.) Once a week. 32

ORTHOPEDIC SURGERY.

FOURTH YEAR.

- Lectures. Asst. Professor Bradford. (H.M.S., and Ch.H.) Once a week, first half-year.
- Clinical exercises. Asst. Professor Bradford. (Ch.H.) In sections, three times a week, first half-year. Three exercises for each student.

ELECTIVE.

- Clinical exercises. Asst. Professor Bradford (Ch.H.) Twice a week. second half-year. 32
 - Also in sections four times a week, second half-year. (Every student measures for apparatus twice, and assists at operations two or three times.)

GENITO-URINARY SURGERY.

FOURTH YEAR. OPTIONAL COURSE.

Clinical lectures. Drs. Watson and Thorndike. (B.C.H.) Once a week.

OVARIAN TUMORS.

FOURTH YEAR. OPTIONAL COURSE.

Lectures. Dr. Homans. (H.M.S.) Once a week for six weeks.

Clinical Surgery.

CHARLES B. PORTER. M.D.. Professor of Clinical Surgery.

MAURICE H. RICHARDSON. M.D.. Assistant Professor of Clinical Surgery,

HENRY H. A. BEACH. M.D.. Lecturer on Surgery.

JOHN W. ELLIOT. M.D.. Lecturer on Surgery.

Samuel J. Mixter, M.D., Assistant in Operative Surgery.

George H. Monks. M.D., Instructor in Clinical Surgery and Assistant in Operative Surgery.

CHARLES L. SCUDDER, M.D., Assistant in Clinical and Operative Surgery. James G. Mumford. M.D., Assistant in Clinical and Operative Surgery.

JOHN B. BLAKE, M.I).. Assistant in Clinical and Operative Surgery.

Franklin G. Balch, M.D., Assistant in Clinical and Operative Surgery. Edwin W. Dwight, M.D., Assistant in Clinical and Operative Surgery.

FRED B. LUND. M.D., Assistant in Clinical and Operative Surgery.

George W. W. Brewster, M.D., Assistant in Clinical and Operative Surgery.

FARRAR COBB. M.D.. Assistant in Clinical and Operative Surgery. Hugh Cabot. M.D.. Assistant in Operative Surgery.

Third year. — Instruction in Clinical Surgery is given at the Massachusetts General and Boston City Hospitals as follows:—

One clinical conference, one lecture, two visits in the hospital wards, and two public operating days each week.

At the conference a student of the the third class presents an elaborate and carefully prepared paper on a surgical case which has been assigned him in the hospital wards. This paper he is obliged to read in the amphitheatre of the Hospital before the whole class, and to defend against their criticism. At the close of the exercise the Professor of Clinical Surgery gives a résumé of the case and his opinions upon it. The students of the second class may attend these exercises preparatory to their active participation in them in their third year.

The written report of an additional case in Clinical Surgery is also required.

The class is divided into small sections and each student attends, one hour a day for six weeks, the surgical out-patient departments of the B.C.H. and the M.G.H. In this sectional teaching the students have instruction on a number of selected subjects in minor surgery, are brought into personal contact with the patient, and have practical experience in the application of bandages and surgical apparatus. They see a large number of cases of minor surgery, fractures, and dislocations. At the end of six weeks the sections are examined on the selected subjects.

Fourth year. — The exercises consist of surgical diagnosis at the bedside, one hour a week throughout the year: of two climical lectures a week at the Massachusetts General and the Boston City Hospitals; of one clinical visit a week at the Boston City Hospital; and of evening visits of sections of the class at the Massachusetts General Hospital Accident Room to see emergency and accident cases.

The class is divided into small sections and these sections receive instruction three hours a week for six weeks in the surgical wards of the Massachusetts General and Boston City Hospitals. In this sectional teaching the students have instruction on a number of selected subjects in major surgery, are brought into personal contact with the patient at the bedside, and have practical experience in the diagnosis, prognosis, and treatment of surgical cases. At the end of the six weeks they are examined on the selected subjects.

During October there are eight exercises on surgical landmarks. A course also is given for two hours a week during the first half-year on surgical anatomy with special reference to its clinical application.

An elective course in Operative Surgery, in which all the classic and many of the modern operations are illustrated upon the cadaver, is given by the Professor of Clinical Surgery. Members of the third and fourth classes are permitted to attend the demonstrations. Students who elect the course repeat the operations on the cadaver under the supervision of the Professor and a corps of assistants.

THIRD YEAR.

Clinical Surgery Conference. Professor C. B. Porter. (M.G.H.) Once a week, October to April inclusive. 28

Clinical lectures. Dr. GAY. (B.C.H.) Once a week during October and November.

Asst. Professor Burrell. (B.C.H.) Once a week, December to May inclusive.

Surgical Visits. In sections of one third of the class, once a week throughout the year, at each hospital, as follows:—

Professors C. B. Porter and Warren, and Dr. Beach. (M.G.H.)
Once a week, first half-year.

Asst. Professor M. H. Richardson and Dr. A. T. Cabot. (M.G.H.) Once a week, second half-year.

Asst. Professor Burrell, and Drs. Monks, Munro, Thorndike, J. B. Blake, E. W. Dwight, and Lund. Once a week throughout the year.

Clinical exercises in Out-Patient Departments. Drs. Scudder, Mumford, Nichols, Blake, Lothrop, Balch, Dwight, Lund, C. A. Porter, Brewster, and Codman. In small sections, daily throughout the year. Each student attends one hour a day for three weeks at each hospital.

FOUTH YEAR.

Clinical lectures. Twice a week throughout the year, as follows:—
Professor C. B. Porter. (M.G.H.) Once a week, first half-year. 16

Asst. Professor M. H. Richardson. (M.G.H.) Once a week, second half-year.

Dr. Monks. (B.C.H.) Once a week, for two hours, October and November.

Asst. Professor Burrell. (B.C.H.) Once a week, for two hours, December to May inclusive.

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Surgical visits. Asst. Professor Burrell, and Drs. Monks, Munro, Thorndike, J. B. Blake, E. W. Dwight, and Lund. (B.C.H.)

Once a week throughout the year.

Diagnosis in Clinical Surgery. Professor C. B. PORTER. (M.G.H.)

Once a week throughout the year.

Surgical emergency cases. (M.G.H.) Every student attends two hours each evening for one week.

Surgical landmarks. Dr. Monks. (H.M.S.) Twice a week during October. 8

Regional surgery. Asst. Professor M. H. RICRARDSON. (H.M.S.)

Twice a week in October, once a week in November, December, and

January. 20

Clinical exercises in surgical wards. Drs. Post, Monks, Munro, Scudder, Thorndike, Mumford, Blake, Lothrop, Dwight, Lund, C. A. Porter, and Cobb.

ELECTIVE.

Operative Surgery. Professor C. B. Porter. (H.M.S.) Twice a week after January first.

Repetition of the course by the students under the direction of Professor C. B. Porter, and Drs. Monks, Mixter, Munro, Scudder, Thorndike, Mumford, Nichols, Blake, Balch, Dwight, Lund, C. A. Porter, Brewster, Cobb, and Cabot (H.M.S). Fifteen hours.

Obstetrics and Gynaecology.

WILLIAM L. RICHARDSON, M.D., Professor of Obstetrics.

Francis H. Davenport, M.D., Assistant Professor of Gynaecology.

Charles M. Green, M.D., Assistant Professor of Obstetrics.

George Haven, M.D., Instructor in Gynaecology.

EDWARD REYNOLDS, M.D., Instructor in Obstetrics and Assistant in Gynaecology.

MALCOLM STORER, M.D., Assistant in Gynaecology.

FRANK A. HIGGINS, M.D., Assistant in Obstetrics.

Franklin S. Newell, M.D., Assistant in Obstetrics.

OBSTETRICS.

Third year. — Instruction is given by lectures, recitations, conferences, and clinical teaching. Students are required to take charge of at least six cases of labor, to receive clinical instruction on at least one of them, to

care for their patients during the convalescence, and to make full written reports of the cases. Many of these reports are read at the conferences and discussed by the class and the instructors.

Fourth year — An elective course in operative obstetrics, with practical illustrations on the cadaver and manikin, is given during the first half-year.

Text-book. — Hirst, A Text-book of Obstetrics.

Collateral Reading. - Reynolds, Practical Midwifery. Lusk, The Science and Art or Midwifery. Grandin and Jarman, Practical Obstetrics. Kucher, Puerperal Convalescence.

THIRD YEAR.

Lectures on the theory and practice of obstetrics. Professor W. L. RICHARDSON. (H.M.S.) Twice a week. 64 32

Recitations. Dr. Reynolds. (H.M.S.) Once a week.

Once a week.

Conferences. Professor W. L. RICHARDSON, Asst. Professor C. M. GREEN, and Drs. REYNOLDS, HIGGINS, and NEWELL. (H.M.S.) 32

Professor W. L. Richardson and Asst. Professor Clinical obstetrics. C. M. Green. (B.L.H.) In sections, twice a week for five months. Every student receives four hours of instruction.

Practical instruction in clinical obstétrics. Drs. Reynolds, Higgins, and NEWELL. Throughout the year, i.e. every student must receive instruction on one of the six cases of labor which he attends, and may call for instruction in the other five cases if he desires.

ELECTIVE.

Operative obstetrics. Asst. Professor C. M. Green. (H.M.S.) Twelve practical exercises, November, December, and January. 12

Repetition of the same exercises by the students under the supervision of Drs. Reynolds, Higgins, and Newell. Three two-hour exercises for each student. 6

GYNAECOLOGY.

Third year. — Lectures, recitations, and clinical instruction are given at the Boston City Hospital and the Boston Dispensary. The large outpatient departments of these institutions are utilized to accustom the student to the methods of examination, to the perfecting of diagnosis, and to the simple forms of treatment.

Fourth year. — An elective course is offered. The instruction is more advanced. Clinical and operative instruction is given in the wards of the Boston City Hospital. Cases are assigned to the students for examination, are reported in full at conferences held once a week, and are discussed by members of the class and by the instructors.

Text-book. — Garrigues, Diseases of Women.

Collateral Reading.—Keating and Coe, Clinical Gynaecology. Thomas and Mundé, Diseases of Women. Skene, Diseases of Women. Davenport, Diseases of Women. Pozzi, Treatise on Gynaecology (American edition). Winckel, Diseases of Women. Emmet, Principles and Practice.

THIRD YEAR.

Lectures or recitations. Asst. Professor Davenport. (H.M.S.) Twice a week, first half-year. 32

Clinical exercises. Drs. Haven (B.D.), Reynolds, (B.C.H.), and Storer (B.D.) In sections, six times a week till January, then three times a week. Every student receives six hours of instruction.

FOURTH YEAR ELECTIVE.

Clinical and operative exercises. Asst. Professor C. M. Green. (B.C.H.)

Twice a week throughout the year.

Clinical conferences. Asst. Professor C. M. Green. (H.M.S.) Once a week, second half-year.

Dermatology and Syphilis.

James C. White, M.D., Professor of Dermatology. Abner Post, M.D., Instructor in Syphilis. John T. Bowen, M.D., Instructor in Dermatology. Charles J. White, M.D., Assistant in Dermatology.

DERMATOLOGY.

Third year.—A combined course of systematic lectures and clinics extends throughout the year.

Fourth year. — An elective course is given; the instruction is clinical. The out-patient department at the Massachusetts General Hospital furnishes ample means of illustration. —In connection with the work a special laboratory course is given on the pathological histology and parasitism of skin diseases, and on the methods of research employed.

Collateral Reading. — Duhring, Hyde, Robinson, Crocker, Kaposi, v. Ziemssen, Besnier, Van Harlingen, Jackson, Taylor.

THIRD YEAR.

Lectures on diseases of the skin. Professor White. (H.M.S.) Once a week.

Clinical dermatology. Professor White. (M.G.H.) Once a week. 32

FOURTH YEAR ELECTIVE.

Clinical dermatology. Dr. Bowen. (M.G.H.) Twice a week. 64
Laboratory instruction in pathological histology and parasitism. Drs.
Bowen and C. J. White. (An optional course open to those who elect Clinical Dermatology.) Eight exercises of two hours each, during second half-year. 16

S YPHILIS.

Fourth year. — Lectures and clinical instruction are given at the Boston Dispensary.

FOURTH YEAR.

Didactic and clinical lectures. Dr. Post. (B.D.) Once a week, first half-year.

Clinical exercises. Dr. Post. (B.D.) In sections, three times a week, first half-year. Each student attends six two-hour exercises. 12

Neurology.

James J. Putnam. M.D., Professor of Diseases of the Nervous System. George L. Walton, M.D., Clinical Instructor in Diseases of the Nervous System.

Philip Coombs Knapp, M.D., Clinical Instructor in Diseases of the Nervous System.

EDWARD W. TAYLOR. M.D.. Instructor in Neuropathology.

SIDNEY A. LORD. M.1)., Assistant in Neurology.

Second year. — Instruction is given during January on the pathology of the nervous system. The course is illustrated by lantern projections of histological preparations.

Third year. — During the first half-year one lecture a week, and during the second half-year two lectures a week, are given at the Massachusetts General Hospital. The lectures are illustrated by cases from the large and excellent out-patient service, and from the medical and surgical wards of the hospital. In addition, the students are given an opportunity to study cases outside the lecture hours, and to report on them.

Fourth year. — Elective course. Every student receives two to three hours of clinical instruction a week, and has access to the clinical material furnished by the Massachusetts General and the Boston City Hospitals.

Text-books. — Gowers, Diseases of the Nervous System. Dana, Text-book of Nervous Diseases. Gray, Mental and Nervous Diseases. Herter, Manual of Diagnosis of Nervous Diseases. Sachs, Nervous Diseases of Children. Mills. The Nervous System and Its Diseases. Oppenheim, Diseases of the Nervous System (English translation).

SECOND YEAR.

Pathology of the nervous system. Dr. Taylor. (H.M.S.) Fifteen exercises during December. 30

THIRD YEAR.

Clinical exercises. Professor Putnam. (M.G.H.) Once a week, first half-year; twice a week, second half-year.

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FOURTH YEAR ELECTIVE.

Clinical	exercise	s. Professor	r PUTNA	м. (М.С.)	H.) Once	a week,	first
halj	f-year.						16
Dr. W	ALTON.	(M.G.H.)	Twice o	a week, first	half-year.		32
Dr. K	NAPP.	(B.C.H.) T	wice a v	reek, second	half-year.		32

Psychiatry.

EDWARD COWLES. M.D., LL.D., Clinical Instructor in Mental Diseases.

EDWARD B. LANE, M.D., Clinical Instructor in Mental Diseases.

Third year. — Systematic lectures are given at the Medical School during the second half-year.

Fourth year. — Optional course. Clinical instruction is given twice a week during February, March. and April at the new McLean Hospital at Waverley. and at the Boston Insane Hospital (Pierce and Austin Farms).

Text-books. — Clouston. Folsom. Monograph in Pepper's System of Medicine. Regis. Chapin.

Collateral Reading.— J. Bevan Lewis. Spitzka. Tuke, Dictionary of Psychiatric Medicine. Kraepelin, Psychiatrie. Hyslop, Mental Physiology, James, Psychology.

THIRD YEAR.

Lectures. Dr. Cowles. (H.M.S.) Once a week, second half-year. 16

FOURTH YEAR. OPTIONAL COURSE.

Clinical instruction. Dr. Cowles. (Mel.H.) Once a week during February, March, and April.

Dr. Lane. (B.I.H.) Once a week during February, March, and April.

Ophthalmology.

OLIVER F. Wadsworth, M.D., Williams Professor of Ophthalmology.
Myles Standish, M.D., Assistant in Ophthalmology.
Frederick E. Cheney, M.D., Assistant in Ophthalmology.
Edwin E. Jack, M.D., Assistant in Ophthalmology.

Fourth year. — Instruction consists of lectures at the Medical School, and of clinical demonstrations at the Massachusetts Charitable Eye and Ear Infirmary, and at the Boston City Hospital.

The elective course consists of clinical work at the Massachusetts Charitable Eye and Ear Infirmary.

Text-books. - DeSchweinitz. Fuchs. Swanzy. Williams.

Collateral Reading. — Loring, On the Ophthalmoscope. Landolt, Refraction and Accommodation. Noves. Norris and Oliver, System of Diseases of the Eye.

FOURTH YEAR.

- Lectures. Professor Wadsworth. (H.M.S.) Twice a week, in October and November.
- Clinical exercises. Professor Wadsworth, and Drs. Standish and Cheney (E. and E.I), and Jack (B.C.H.). In sections, eight hours a week, first half-year. Every student receives sixteen hours of instruction.

ELECTIVE.

Clinical exercises. Professor Wadsworth. (E. and E.I.) Two two-hour exercises a week, second half-year. 64

Otology.

CLARENCE J. BLAKE, M.D., Professor of Otology.
J. Orne Green, M.D., Clinical Professor of Otology.
EUGENE A. CROCKETT, M.D., Assistant in Otology.
Philip Hammond, M.D., Assistant in Otology.

Fourth year. — Lectures and clinical instruction are given at the Massachusetts Charitable Eye and Ear Infirmary, and at the Boston City Hospital.

Text-books. — Politzer, by Dalby. Hovell, Diseases of the Ear and Naso-Pharynx. Buck, First Principles of Otology.

Collateral Reading. — Schwartze, Handbuch der Ohrenheilkunde.

FOURTH YEAR.

Lectures. Professor C. J. Blake. (H.M.S.) Twice a week during October. 8
Professor J. O. Green. (H.M.S.) Once in October. 1

Professor J. O. Green. (H.M.S.) Twice a week during November. 8

Professor C. J. Blake or Professor J. O. Green. (H.M.S.) Twice a week during December.

Clinical exercises. Professors C. J. Blake and J. O. Green. (E. and E. I.)

In sections, two hours, three times a week, first half-year. Every student attends four or five exercises.

8-10

Anatomy of the ear. Dr. Hammond. (H.M.S.) Two recitations a week during October. One exercise for each student.

ELECTIVE.

Clinical exercises. Professors C. J. Blake and J. O. Green, and Drs. Crockett and Hammond. (E. and E. I.) Three two-hour exercises a week, second half-year.

Laryngology and Rhinology.

THOMAS A. DEBLOIS, M.D., Clinical Instructor in Laryngology.

JOHN W. FARLOW, M.D., Clinical Instructor in Laryngology.

ALGERNON COOLIDGE, JR., M.D., Clinical Instructor in Laryngology.

Fourth year. — Instruction in this department consists of lectures and demonstrations, and of training in the use of instruments. The entire class has one lecture a week during the first half-year. For the practical work at the Massachusetts General and Boston City Horpitals. and the Boston Dispensary, the class is divided into small sections.

FOURTH YEAR.

Lectures. Dr. Farlow. (H.M.S.) Once a week, first half-year. 16 Clinical exercises. Drs. DeBlois (B.C.H.), Farlow (B.D.), and Coolinge (M.G.H.). In sections, first half-year. Twelve exercises for each student.

Legal Medicine.

FRANK W. DRAPER. M.D.. Professor of Legal Medicine. EDWIN W. DWIGHT, M.D.. Instructor in Legal Medicine.

Fourth year. — Instruction consists of lectures and medico-legal demonstrations three times a week during the first half-year.

Text-book. — Taylor, Manual of Medical Jurisprudence. Collateral Reading. — Witthaus and Becker.

FOURTH YEAR.

Lectures and medico-legal demonstrations. Professor Draper. (H.M.S. and B.C.H.) Three times a week, first half-year. 48

Hygiene.

CHARLES HARRINGTON. M.D.. Assistant Professor of Hygiene.

Fourth year. — The instruction consists of lectures and demonstrations. The elective laboratory course is open to specially qualified students who may be desirous of undertaking special research, or of acquiring a practical knowledge of the analysis of foods, water, air, soils, etc.

Text-book. — Wilson. Handbook of Hygiene.

Collateral Reading. — Nother and Firth. Hygiene. Manson. Tropical Diseases. Newsholm, Vital Statistics. Mason, Water Supply. Abbott, Hygiene of Transmissible Diseases.

FOURTH YEAR.

Lectures and demonstrations. Asst. Professor Harrington. (H.M.S.)

Three times a week, second half-year.

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ELECTIVE.

Laboratory course for specially qualified students. Asst. Professor Harrington. (H.M.S.) Three hours, three times a week, second half-year.

Municipal Sanitation.

Samuel H. Durgin, M.D., Lecturer on Hygiene.

FOURTH YEAR. OPTIONAL COURSE.

Lectures. Dr. Durgin. (H.M.S.) Twice a week, February and March.

EXAMINATIONS.

The final examination in every required subject is held at the close either of the first or of the second term of the school year. The examination, therefore, in every subject occurs once a year, but an opportunity to make up failures in examinations is offered at the opening of the school year. The examination in certain studies of the first and fourth years is held at mid-year only, and is for those who are members of the School at the time, and for those entitled to apply for the degree, provided they have failed previously in those subjects. The June examination is only for those who are members of the School at the time, and for those entitled to apply for the degree. The September examination is only for those who have been examined previously and have failed in the subject of the examination, or for applicants for advanced standing. In some branches a portion of the examination consists of practical work in the laboratory.

The amount of time allowed for each examination is as follows:—

First Year. — Anatomy * (practical), Histology * (1 hr.), Physiology (3 hrs.), Physiological Chemistry (1 hr.).

Second Year.—Bacteriology* (1 hr.), Pathology* (2 hrs. written, 1 hr. practical), Anatomy (2 hrs.), Clinical Chemistry (2 hrs.), Materia Medica and Therapeutics (2 hrs.).

Third Year.—Theory and Practice (3 hrs.), Pediatrics (2 hrs.), Surgery (2 hrs written, 1 hr. practical), Obstetrics (3 hrs.), Gynaecology (1 hr.), Dermatology (1 hr.), Neurology (1 hr.), Psychiatry (1 hr.).

Fourth Year. — Clinical Medicine (3 hrs.), Clinical Surgery (2 hrs.), Orthopedics* (1 hr.), Syphilis* (1 hr.), Ophthalmology*(1 hr.), Otology* (1 hr.), Laryngology* (1 hr.), Legal Medicine* (1 hr.), Hygiene (1 hr.).

^{*} The examinations in these subjects are held at the end of the first half-year.

Electives. — Anatomy (1 hr.), Advanced Histology (1 hr.), Histology of the Nervous System (1 hr.), Embryology (1 hr.), Physiology (1 hr.), Physiological Chemistry (2 hrs.), Chinical Chemistry (1 hr.), Bacteriology (1 hr.), Comparative Etiology of Infectious Diseases (1 hr.), Clinical Microscopy (1 hr.), Operative Surgery (1 hr.), Orthopedics (2 hrs.), Operative Obstetrics* (1 hr.), Gynaecology (2 hrs.), Dermatology (2 hrs.), Neurology (2 hrs.), Ophthalmology (Practical, 1 hr.), Otology (2 hrs.), Hygiene (1 hr.).

In addition to the above examinations every student is required: -

To dissect the three parts of the body to the satisfaction of the demonstrator;

To present a satisfactory report of the analysis of a specimen of urine, and of the clinical examination of a specimen of blood;

To examine and report on a case of fracture, and on two other clinical cases in Surgery;

To visit and report on four medical cases;

To take charge of and report on six cases in Obstetrics, and to receive instruction on at least one of them;

To report a clinical case in each of the electives, Orthopedic Surgery, and Ophthalmology, if elected.

In the fourth year, three hours of examinations in electives are obligatory. The choice of electives must be made within the first two weeks of the School year, and must be given to the Secretary in writing on blanks furnished at the Dean's office.

The general elective courses are open to all members of the fourth class who elect them with the intention of taking the examination.

The examinations in the required courses in Orthopedic Surgery, and Otology cannot be taken by those who choose electives in these subjects. Instead, there is a two-hour examination in the elective, of which one hour is considered equivalent to the examination in the required course, and the other counts as a one-hour elective.

The examination in elective Ophthalmology will be clinical and include the written report of a case.

Candidates for the degree who have served satisfactorily as Internes in the Massachusetts General Hospital, Boston City Hospital, Carney Hospital, Children's Hospital, and State Almshouse Hospital, for a period of not less than one year, may be exempt from examination in the electives of the fourth year.

No student is allowed to anticipate the examinations in the regular course of studies of his year, except by special permission of the Faculty, nor shall an undergraduate in medicine be allowed to take the examination

^{*} The examinations in these subjects are held at the end of the first half-year.

in Advanced (2d yr.) Anatomy until he shall have passed the examination in Elementary (1st yr.) Anatomy.

After two failures to pass in any subject a charge of three dollars is made for each subsequent examination in that subject.

DEGREES.

DEGREE OF DOCTOR OF MEDICINE.

Every candidate for the degree of Doctor of Medicine at this University must be at least twenty-one years of age, and of good moral character. He must fulfil all the requirements for admission to this Medical School; must give evidence of having studied in a recognized Medical School at least four full years, of which one year must be spent at this School; must pass all required examinations, and fulfil satisfactorily the special requirements enumerated on page 45.

The degree of Doctor of Medicine will be given to those candidates who fulfil the above requirements. The degree of Doctor of Medicine *cum laude* will be given to candidates who have obtained an average of eighty per cent. or over, in all the required examinations.

Candidates for the degree must make application for it in writing, on blanks furnished at the Dean's office, on or before May 31 of the year in which they propose to graduate.

Candidates for the degree of Doctor of Medicine are not required to present a thesis; but they may present a voluntary thesis which, if of conspicuous merit, may receive honorable mention; if the thesis is also of a suitable character, it may be read at the Commencement exercises. Theses must be completed and delivered to the Dean on or before the first day of June.

A graduate of another medical school of recognized standing may obtain the degree of Doctor of Medicine at this University by fulfilling all the requirements for undergraduates above mentioned; but he may take the examination in any subject only at the times when regularly it is held, that is, in September, at the mid-year, or in June.

DEGREE OF MASTER OF ARTS.

The degree of Master of Arts is open to graduates of the Harvard Medical School who are also Bachelors of Arts of Harvard College, and to Bachelors of Arts of other Colleges who shall be recommended by the Faculty of Arts and Sciences of Harvard College. Candidates must pursue an approved course of study in Medicine for at least one year after taking the degree of Doctor of Medicine. Applications for approval of course of study offered for this degree must be made to the Administrative Board of the Graduate School on or before the thirtieth day of April. It is advisible to apply to the Board early in the year.

FEES AND EXPENSES.

The fees are: — For matriculation, five dollars; for the first three years, two hundred dollars for each year (if in two payments, at the first, one hundred and twenty dollars; at the second, eighty dollars); for a half-year alone, one hundred and twenty dollars; for the full year, to all students entitled to be classified as fourth-year students and who have been regular members of the School for three full years, one hundred dollars; for graduation, thirty dollars.

During the first two years there are the following additional expenses: two dollars for each of the three parts required for dissection; three dollars for physiological material; and a maximum of five dollars a year for chemical material, in addition to the charge for breakage of glass apparatus. A deposit of fifteen dollars is required of those who have not filed a bond to cover these charges for chemical and physiological material and breakage. The balance of this deposit is returned at the end of the year.

A deposit of two dollars with the Dean will entitle a student to the use of a locker in the School building.

A student who wishes to rent a microscope of the School can do so upon payment of three to six dollars a half-year.

In the fourth year a charge of three dollars is made for material used in the course in Operative Surgery.

Of students who do not pay in advance a bond for three hundred dollars, executed by two sufficient bondsmen, one of whom must be a citizen of the United States, is required. A copy of such bond will be sent, on application to the Secretary of the Faculty, and all students are recommended to deposit such a bond. To students depositing bonds, term-bills will be presented one week before the end of the first term, to be paid within two weeks; and also one week or more before Commencement, to be paid on or before the beginning of the next academic year. Such students will be held responsible for the payment of fees until they have notified the Dean, in writing, of their intention to withdraw from the School, and have subsequently received their bond from the Bursar.*

No officer or student of the University is accepted as a bondsman.

Whenever a student is obliged to withdraw from the School before the last four weeks of a half-year, for no misdemeanor, but for good and sufficient reason, to be determined in all cases by the Faculty, it shall be recommended that he be entitled to a remission of three-fourths of the amount due for that portion of the time during which he receives no instruction. This remission will date from the reception by the Dean of a written notice of the student's withdrawal from the School.

^{*} The Bursar's office is in Dane Hall, Harvard Square, Cambridge. Hours 9-1.

No degree will be conferred till all dues to the School are discharged.

The student's general expenses may be reduced, in accordance with his means, to the standard which prevails in other cities. A list of boarding places, at various prices, can be obtained at the rooms of the Young Men's Christian Association, corner of Berkeley and Boylston Streets, and the rooms of the Young Men's Christian Union, No. 48 Boylston Street, Boston.

CLINICAL ADVANTAGES.

The Medical Department of the University is established in Boston, in order to secure for Anatomy, Pathology, and the various Clinical Subjects those advantages which are found only in large cities.

There are Hospital visits or operations daily.

The Massachusetts General Hospital. — During the past year, 5,086 patients were treated in the wards, and 31,003 in the out-patient departments. Patients are received from all parts of the United States and the Provinces, and are visited by the students, with the attending physicians and surgeons, on four days in the week. Operations are numerous, and are performed in the amphitheatre, which is provided with seats for 400 persons. Clinics in the following special branches have been established in connection with the out-patient department: Dermatology, Laryngology, Diseases of the Nervous System, and Ophthalmology. The Dalton scholarship of \$500 is open to the house pupils.

The Boston City Hospital. — During the past year, 8,719 cases were treated in its wards, and 22,640 in its various out-patient departments. The medical wards always contain many cases of acute diseases, and changes are taking place constantly. The opportunities for seeing fractures, injuries, and traumatic cases of all kinds are excellent, since, on an average, 800 street accidents are treated yearly. Surgical operations are performed in the amphitheatre. There are special services for diseases of women, of the eye, the ear, the skin, and the nose and throat. Diseases of women and of the nervous system are also largely treated in the outpatient department. Clinical instruction is given by the physicians and surgeons two or more times a week.

In these two hospitals the facilities for witnessing Operative Surgery are unsurpassed. Twice a week operations are performed in the presence of the class. The number of these operations is large, reaching nearly two thousand a year. The variety is great, embracing every surgical disease and injury, including the surgical operations on the eye and ear.

The Boston Lying-in Hospital. — More than six hundred patients were confined during the last year in the Hospital. In the out-patient department over sixteen hundred cases were attended by the hospital Externes, who are appointed from the third and fourth year students.

Clinical instruction is given in these cases by the physicians to out-patients and by the house physicians.

The Boston Dispensary. — 43,912 patients were treated at this public charity during the past year. A new building has lately been erected at a cost of \$50,000, where students have ample and excellent opportunity for seeing practical work in the diagnosis and treatment of cases illustrating the various branches of Medicine and Surgery.

The Infants' Hospital. — The wards of the Hospital are devoted entirely to children under two years of age. About 3,000 children of all ages are treated annually in the out-patient department. The material of the Hospital is used throughout the year for teaching both students and graduates.

Children's Hospital. — During the past year more than seven hundred cases were treated in the wards and about seventy-six hundred in the outpatient departments. Instruction in orthopedic surgery and in the general diseases of children is given by members of the hospital staff.

The Massachusetts Charitable Eye and Ear Infirmary.—22,349 patients were treated at this institution during the past year. These cases present every variety of disease of the ear and eye, and supply a large number of operations. A new and enlarged hospital, considered to be one of the best of its kind in the world, has been erected on land adjoining the Massachusetts General Hospital. It is believed that this building will provide adequately for the proper treatment of the constantly increasing number of patients.

Long Island Hospital, Boston Harbor.—This Hospital is designed particularly for the treatment of chronic diseases. It has 250 beds, with an average daily population of 229 (1899). It has marked advantages for the study of syphilis, tuberculosis, diseases of the nervous system, and chronic diseases of the heart and of the kidneys. The number of autopsies is annually about 50 per cent of the deaths (66 in 1899), a fact which affords an unusual opportunity for the study of pathological anatomy. The material in the Hospital is used for clinical instruction by the members of the Visiting Staff.

The Marine Hospital at Chelsea receives from the shipping of the port a large number of patients, who furnish examples of the diseases of foreign countries and of distant parts of the United States. Many cases of venereal disease, in its various forms, are treated annually.

Students are also permitted to visit the Free Hospital for Women and the Carney Hospital on application to the physicians on duty.

There are more than sixty appointments annually for Internes in the various hospitals, and nearly as many more for Assistants in the out-

patient departments. Appointments for the Massachusetts General and Boston City Hospitals are for terms of one to two years (according to the service chosen); for the Boston Lying-in Hospital for six months, and for the Free Hospital for Women for nine months.

WARREN MUSEUM.

The collection has about nine thousand specimens, illustrating both normal and pathological anatomy and materia medica. These are placed in the hands of the student at any time during the day, upon application to the Curator.

Besides dissections and serial sections of many bones, the anatomical collection includes many corrosive preparations, plaster and papier maché models of bones, organs, and various parts of the body, and frozen sections.

The pathological collection is being constantly enlarged by the addition of numerous specimens, preserved in their natural colors by Kaiserling's method.

LIBRARIES.

Medical School students who are engaged in research work have access to the special libraries of the various departments on application to the persons in charge.

The College Library at Cambridge is open to the students of this School.

The Boston Public Library, which contains a large collection of medical books, is open to students who are inhabitants of Boston. Students, not inhabitants of Boston, who have filed a bond at the Bursar's office, or deposited with the Bursar the sum of fifty dollars, may also use this library. The Bursar will furnish on application the necessary certificate of bond or deposit.

PECUNIARY AID.

FELLOWSHIPS.

BULLARD FELLOWSHIPS. In 1891, WILLIAM STORY BULLARD, of Boston, gave the sum of fifteen thousand dollars for the establishment of three fellowships of five thousand dollars each "in memory of three physicians who were distinguished for their honorable personal character and for their professional services in this community". Accordingly the three following fellowships were established with a yearly income of two hundred and twenty-five dollars each:—

THE GEORGE CHEYNE SHATTUCK MEMORIAL FELLOWSHIP.
THE JOHN WARE MEMORIAL FELLOWSHIP.
THE CHARLES ELIOT WARE MEMORIAL FELLOWSHIP.

The income from any one or all of these fellowships may be paid to any student or member of the medical profession who shall be selected by the Administrative Board of the Medical School to make such original investigations in Medical Science as in their opinion will be most useful to the profession and to the community. The results of such investigations shall not, however, be published as a research performed under the grant of a Bullard Fellowship, unless the work shall have received the approval of the Committee.

Holders of Bullard Fellowships are required to do an amount of work equivalent to not less than ten hours a week throughout the academic year and to present to the Committee at the end of the academic year a report on the amount and result of the work performed.

Austin Fellowships. In 1900, two fellowships in Surgical Pathology, of five hundred dollars each, for 1900–1901, were established from the income of the Austin Fund.

SCHOLARSHIPS.

The Cheever Scholarship is awarded to a student of the first year class. The Hayden Scholarship may be so awarded. All the other Scholarships are awarded to members of the three upper classes.

BARRINGER SCHOLARSHIPS. Two, known as the Edward M. Barringer Scholarship No. 1, and the Edward M. Barringer Scholarship No. 2, and having a yearly income of three hundred dollars and two hundred dollars respectively, from a bequest of Edward M. Barringer, will be awarded to deserving students, preferably those of the fourth class.

DAVID WILLIAMS CHEEVER SCHOLARSHIP, with an income of two hundred and fifty dollars, was founded in 1889 by David Williams Cheever, M.D., LL.D., of Boston, of the Class of 1852. It is to be awarded to a poor and meritorious student of the first year, after three months' probation in the Medical School.

ISAAC SWEETSER SCHOLARSHIP was founded in 1892 by Mrs. Anne M. Sweetser. The income of two hundred and fifty dollars is to be "devoted to the aid of poor students of ability who would not otherwise be able to continue the studies necessary for their profession".

CLAUDIUS M. JONES SCHOLARSHIP, with an income of two hundred and fifty dollars, is from a bequest of six thousand dollars by Claudius Marcellus Jones, of the Class of 1866, M.D. 1875.

ORLANDO W. DOE SCHOLARSHIP. The bequest of ORLANDO WITHERSPOON DOE (A.B. 1865, M.D. 1869) was five thousand dollars. One half of the income derived therefrom, amounting to one hundred dollars, "is to be given annually as a scholarship to a deserving student in the Medical department".

Charles Pratt Strong Scholarship, with an income of one hundred dollars, was founded in 1894 by friends and patients of the late Charles Pratt Strong, of the Class of 1876, M.D. 1881.

The Lewis and Harriet Hayden Scholarship for colored students was founded in 1894 from a bequest of Mrs. Harriet Hayden. The income is two hundred dollars.

ALFRED HOSMER LINDER SCHOLARSHIP, with an income of two hundred dollars, was founded in 1895 by Mrs. George Linder. It is to be awarded to a needy student who shall have proven himself to be of sound principles and marked ability.

Joseph Eveleth Scholarships. Three Scholarships with an annual income of two hundred dollars each. Founded from the residuary bequest of thirty-seven thousand eight hundred and ninety-seven dollars and fourteen cents, made by Joseph Eveleth, of Boston, "for aiding deserving and indigent young men in obtaining an education in said College or any of the schools connected therewith". Three Scholarships on this foundation have been assigned to the Harvard Medical School.

EDWARD WIGGLESWORTH SCHOLARSHIP, with an income of two hundred dollars, was founded in 1897 by the family of the late Edward Wigglesworth, of the Class of 1861, M.D. 1865, the yearly income of the fund to be paid to such needy and deserving students of the Medical School as the Medical Faculty shall annually recommend.

HILTON SCHOLARSHIPS. Two Scholarships, with an income of two hundred and twenty-five dollars each, were founded in 1897 from a bequest of William Hilton.

Charles B. Porter Scholarship, with an income of two hundred dollars, was founded in 1897 from a bequest of five thousand dollars by William L. Chase.

FACULTY SCHOLARSHIPS. Four scholarships, with an income of two hundred dollars each, have been established by the Faculty, and are open to meritorious students who have been at the School for at least one year. Only those students needing assistance are expected to apply; and of such, those holding the highest rank will have the preference. Holders of Faculty scholarships may be required to render assistance in laboratory courses to an amount not exceeding four hours a week.

The John Thomson Taylor Scholarship, with an income of two hundred dollars, was founded in 1899 by Mrs. Frederic D. Philip in memory of her brother, John Thomson Taylor, who died in 1889. He was a student of the Medical School from 1887 to 1889.

LUCIUS F. BILLINGS SCHOLARSHIP, with an income of two hundred dollars, was founded in 1900 from a bequest under the will of Lucius F. Billings.

COTTING GIFT. The income of a fund received from the late Dr. Benjamin E. Cotting will be given to such medical student or students as the Medical Faculty may select, having regard to the pecuniary needs, intellectual capacity, faithfulness and earnest endeavor, rather than to highest scholarship merely. The amount to be awarded annually will be one hundred and twenty-five dollars.

The income of the John Foster Fund, amounting to about one hundred and fifty dollars, is payable every other year to one or more meritorious students needing assistance. The next payment will be made in 1902.

All applications for scholarships or pecuniary aid, except for the Cheever and Hayden Scholarships, must be handed to the Dean on or before *June 1* of each year.

Applications for the Cheever and Hayden Scholarships must be handed to the Dean on or before *November 30*. These scholarships are open only to students who are members of the school at the time of application.

Blank forms, on which all applications for pecuniary aid must be made, may be obtained of the Dean.

PRIZES.

Boylston Medical Prizes. — These prizes, which are open to public competition, are offered annually for the best dissertations on questions in medical science proposed by the Boylston Medical Committee.

At the annual meeting in Boston in 1900 a prize of \$150 was awarded Frederic J. Cotton, M.D., of Boston, for an essay entitled A Study of the Pathology of Colles' Fracture of the Radius.

For 1901 two prizes are offered: -

- 1. A prize of one hundred dollars for the best dissertation on *The* results of Original Work in Anatomy, Physiology, Physiological Chemistry, or Pathology. The subject to be chosen by the writer.
- 2. A prize of one hundred dollars for the best dissertation on The results of Original Investigations in the Psychology of Mental Disease. Dissertations on these subjects must be sent post-paid to W. F. Whitney, M.D., Harvard Medical School, Boston, Mass., on or before January 1, 1901.

For 1902 two prizes are offered: —

- 1. A prize of one hundred and fifty dollars for the best dissertation on *The results of Original Work in Anatomy*, *Physiology*, *or Pathology*. The subject to be chosen by the writer.
- 2. A prize of one hundred and fifty dollars for the best dissertation on The method of Origin of Serpentine Arteries and the Structural Changes to be found in them. Their Relation to Arterio-capillary Fibrosis, Obliterating Endarteritis and to Endarteritis Deformans.

Dissertations on these subjects must be sent to the same address as above on or before January 1, 1902.

In awarding these prizes preference will be given to dissertations which exhibit original work, but if no dissertation is considered worthy of a prize, the award may be withheld.

Each dissertation must bear in place of its author's name some sentence or device, and must be accompanied by a sealed packet bearing the same sentence or device, and containing within the author's name and residence. Any clew by which the authorship of a dissertation is made known to the Committee will debar such dissertation from competition.

Dissertations must be written in a distinct and plain hand, and their pages must be bound in book form.

PRIZES. 55

All unsuccessful dissertations are deposited with the Secretary, from whom they may be obtained, with the sealed packet unopened, if called for within one year after they have been received.

By an order adopted in 1826, the Secretary was directed to publish annually the following votes:—

- 1. That the Board do not consider themselves as approving the doctrines contained in any of the dissertations to which premiums may be adjudged.
- 2. That in case of publication of a successful dissertation, the author be considered as bound to print the above vote in connection therewith.

The Boylston Medical Committee is appointed by the President and Fellows, and consists of the following physicians: Robert T. Edes, M.D., President; William F. Whitney, M.D., Secretary; H. P. Bowditch, M.D., Frank W. Draper, M.D., J. Collins Warren, M.D., Samuel G. Webber, M.D., F. H. Williams, M.D., Edward S. Wood, M.D.

The address of the Secretary of the Boylston Medical Committee is William F. Whitney, M.D., Harvard Medical School, Boston, Mass.

William H. Thorndike Prize. — A prize of two hundred dollars will be given annually to the author of the best essay on some subject in any branch of Surgery.

The students of the Harvard Medical School and graduates of under five years' standing of any recognized medical school are eligible in competition for this prize.

Each essay must bear in place of its author's name some sentence or device, and must be accompanied by a sealed packet bearing the same sentence or device, and containing within the author's name and residence. If the author is a graduate, it must also contain the date of his graduation in medicine and the medical school from which he was graduated. Any clew by which the authorship of an essay is made known to the judges will debar such essay from the competition.

The essays must be sent to the Dean of the Harvard Medical School, 688 Boylston Street, Boston, Mass., U. S. America, on or before November 1 of each year, and the award will be made annually on December 24. If no essay is considered worthy of a prize, no award will be made.

Anatomical Prize. — Professor C. B. Porter offers a prize of fifty dollars open to all students, and graduates of not more than five years' standing, except teachers of anatomy, for the best dissection deserving the award illustrative of surgical anatomy, the specimen to be presented to the Museum.

Otological Prize. - For the best preparation illustrating the osseous anatomy of the ear or for the best thesis showing original work on an otological subject, a prize of twenty-five dollars is offered, open to fourthvear students.

Other Prizes.—The Bowdoin, Dante, Toppan and Sumner Prizes, offered by the Faculty of Arts and Sciences, are open to students in all departments of the University. Full particulars in regard to these prizes may be found in the University Catalogue.

COURSES OF STUDY FOR GRADUATES.

The Faculty has arranged, for graduates of recognized medical schools, an improved plan of instruction, embracing nearly all the branches of practical and scientific medicine. It is designed to supply good opportunities for clinical and laboratory study.

The laboratories of the School are well equipped for practical work and the clinical advantages offered by the hospitals of Boston furnish abundant material for all purposes of instruction. The following are the principal institutions:—

Massachusetts General Hospital, Boston City Hospital, Boston Dispensary, Massachusetts Eye and Ear Infirmary, McLean Hospital (for the Insane), Free Hospital for Women,

Boston Lying-in Hospital, Infants' Hospital, Children's Hospital, Carney Hospital.

Instructors in the Medical School are members of the medical and surgical staffs of these institutions, to all of which students are admitted under their immediate supervision.

Instruction in the graduate courses is, with but few exceptions, entirely distinct from that of the undergraduate department of the School; but students of the former are admitted also to all the regular lectures (not clinical) of the latter, without extra charge, during their connection with the School.

Instruction is conducted in small classes and under the personal direction of the heads of departments.

Instruction is given throughout the academic year, October to June. A certificate of attendance will be furnished, if desired.

FEES.

The fees for the separate courses in the several departments vary from \$5 to \$125.

An extra fee is required for the use of material in laboratory, dissecting, and operative courses.

Graduates seeking admission to any of the graduate courses must first register their names at the Dean's office at the Medical School, where all fees are payable, and obtain a receipt to be shown at the first exercise.

For further information and full description of the courses and lectures for graduates, address Dr. William L. Richardson, Dean, Harvard Medical School, 688 Boylston Street, Boston, Mass.

SUMMER COURSES OF INSTRUCTION.

During the summer of 1901, courses in many branches of practical and scientific medicine will be given by teachers in the School. These courses will be clinical in character and will be given at the Hospitals and Dispensaries by the physicians and surgeons on duty. Practical instruction will also be given in several of the Laboratories of the School by the instructors in charge.

A list of the Summer Courses will be announced early in the Spring. For further information address Dr. William L. Richardson, Dean, Harvard Medical School, 688 Boylston Street, Boston, Mass.

The following are the Courses provided in the Graduate Department for 1900-01.

FEE.	\$25. 20. 20. 25. 25. 25. 75-125 Special.*	30. 30. 30. Special.*	25. 30–50. 25. 25. 75–125.	25. 15. 15. 25. 25.	88.50 82.00 82.00 82.00 82.00 83.00 80 80 80 80 80 80 80 80 80 80 80 80 8	100000000000000000000000000000000000000
TIME.	Special* After Nov. 1 Special* Jan. Special* Oct.—May	Oct.—Jan. Oct.—Jan. Special *	Special * Special * Special * Special *	April Special * Oct.—June Oct., Nov. Special *	Dec., Jan., Pen., Marking Oct., Jan. March, April, May Dec., Feb.	Oct.—Nov., Jan.—Feb. Oct., Nov. Oct.—Nov. Oct.—Jan. Dec., Jan. Oct.—Jan. Nov.
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SUBJECT.	1. Anatomy of the Joints 2. Dissection Courses 3. Special Anatom.Instruction 4.4. Histology and Microscopy 7.5. Elem. Human Embryology 7.6. Advanced Embryology 7. Physiology 8. Toxicology and Medico Legal Ex-	M 22 22 2	13. Practical Pathology 14. Pathological Histology 15. Neuropathology 16. Advanced Nouropathology 16. Advanced Nouropathology		23. Minor Surgery f-24. Minor Surgery 25. Clinical and Operative Surgery f-26. Clinical Surgery 27. Clinical and Operative Surgery	28. Clinical, Operative, Genito-urmary, Pathological and Minor Surgery. 29. Clinical Surgery. 30. Genito-Urinary Surgery. 31. Surgical Diagnosis. 32. Genito-Urinary Surgery. 33. Surgical Diagnosis.

COURSES FOR GRADUATI	20.
*: ***********************************	20. 35. 20. 20. Special.*
Nov., Dec., April, May Jan., Feb., March Jan., Feb., March Oct., Nov., Dec., Apr., May Oct., Nov., Dec., Apr., May Jan., Feb., March Oct., Nov. Dec., Jan. Feb., March April, May Oct.—June. Feb., March April, May March Special* Feb., March April, May March Special* Feb., March April, May March Special* Feb., March Special* Feb., March Special* April, May	ospital Feb., March Special* Special* Special* Special* Special* The special s
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Dr. W. L. Richardson Dr. C. M. Green Dr. Haven Dr. Haven Dr. Reynolds Dr. Storer Dr. Storer Dr. Backingham Dr. Buckingham Dr. Buckingham Dr. Buckingham Dr. Buckingham Dr. White Dr. White Dr. Post Dr. Putnam Dr. White Dr. Putnam Dr. Walton Dr. Cowles Dr. Cowles Dr. Cowles Dr. Standish Dr. Hammond Dr. Knapp Dr. Knapp Dr. Knapp Dr. Knapp Dr. Knapp Dr. Standish Dr. Cowles Dr. Cowles Dr. Cowles Dr. Cowles Dr. Standish Dr. Standish Dr. Cheney Dr. Cheney Dr. Cheney Dr. Jack	
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SUMMER COURSES OF INSTRUCTION IN THE MEDICAL SCHOOL. 1900.

No.	Subject.	Instructor.	Place.	No.of Exer- cises.	No.of Exer-Begins.	Ends.	Days.	Hour.	Fee.
-	Histology	Dr. Stubbs	Medical School	22	July 2	2 July 31	31 Daily	က	20.00
Ç1	Physiology	Dr. Cleghorn	Medical School	30	June 20	20 July 31	31 Daily	9-12	40.00
က	Physiology	Drs. Franz & Mullberg Medical School	Medical School	30	July 2	2 Aug. 10 Daily	Daily	6	30.00
4	Chemistry	Dr. Hills	Medical School	25	July 2	2 Aug. 4	4 Daily	10	30.00
20	Urinary Chemistry	Dr. Ogdén	Medical School	30	July 2	Aug. 10	Daily	7	30.00
9	Physiological Chemistry	Dr. Ogden	Medical School	25	July 2	2 Aug. 3	Daily	1-4	20.00
1-	Pathology	Dr. Mallory	City Hospital	42	July 1	Aug. 18 Daily	Daily	9-4	50.00
S	Neuropathology	Dr. Taylor	Medical School	20	July 6	6 Aug. 20	20 Mo. We. Fr.	4	25.00
6	Pathology	Dr. Pearce	City Hospital	24	Aug. 27	27 Sept. 22	22 Daily	9-1	25.00
10	10 Pathology	Dr. Magrath	Medical School	30	July 2	Aug.	10 Daily	7-6	30.00
11	Clinical Medicine	Dr. Vickery	Mass. Gen. Hosp.	13	July 2	July 30	Mo. We. Fr.	10	15.00
12	Clinical Medicine	Dr. Vickery	Mass. Gen. Hosp.	13	Aug. 1	Aug. 29	Mo. We. Fr.	10	15.00
13	Clinical Medicine	Dr. Bartol	City Hospital	20	Aug. 2	Sept. 15	2 Sept. 15 Tu. Th. Sat.	10	20.00
14	Clinical Medicine	Dr. Morse	City Hospital	13	July 2	2 July 30	30 Mo. We. Fr.	10	20.00
15	Clinical Medicine	Dr. Morse	City Hospital	17	Aug. 1	1 Aug. 31	31 Mo. We. Fr.	10	20.00
16	Clinical Medicine	Dr. Cabot	Mass. Gen. Hosp.	25	July 2	2 July 31	Daily	6	30.00
17	Clinical Medicine	Dr. Cabot	Mass. Gen. Hosp.	27	Aug. 1	Aug. 31	Daily	6	30.00
18	18 Clinical Medicine	Dr. Cabot	Mass. Gen. Hosp.	25	Sept. 1	1 Sept. 29 Daily	Daily	6	30.00

19	19 Clinical Hæmatology	Dr. Hewes	Mass. Gen. Hosp.	18	Aug. 15	Sept. 30	Aug. 15 Sept. 30 Mo. Tu. W. Th.	11	25.00
20	Diseases of the Stomach	Dr. Hewes	Mass. Gen. Hosp.	13	July 3	3 July 31	Tu. Th. Sat.	10-12	30.00
21	Diseases of the Stomach	Dr. Hewes	Mass. Gen. Hosp.	13	Aug. 20	20 Sept. 30	30 Tu. Th. Sat.	10-12	30.00
22	Clinical Medicine	Dr. Joslin	Boston Dispensary	13	July	July	Daily	10	15.00
23	Clinical Medicine	Dr. Joslin	Boston Dispensary	13	Aug.	Aug.	Daily	10	15.00
24	Clinical Medicine	Dr. Perry	Boston Dispensary	25	July 2	2 July 31	Daily	10.30	15.00
25	Orthopedic Surgery	Dr. Bradford	Children's Hosp.	32	July 2	Aug. 14	2 Aug. 14 Mo.Tu.W.Th.S.		20.00
26	Clinical and Operative Surgery	Dr. Mixter	Mass. Gen. Hosp.	20	June 1	July	30 Mo. We. Fr.	11	25.00
27	Clinical and Operative Surgery	Dr. Mixter	Mass. Gen. Hosp.	56	Aug. 1	Sept. 28	1 Sept. 28 Mo. We. Fr.	11	25.00
28	Minor Surgery	Dr. Brooks	Mass. Gen. Hosp.	13	July 2	2 July 30	30 Mo. We. Fr.		15.00
29	Minor Surgery	Dr. Brooks	Mass. Gen. Hosp.	13	Aug. 1	1 Aug. 29	Mo. We. Fr.	10	15.00
30	Minor Surgery	Dr. Brooks	Mass. Gen. Hosp.	13	Sept. 3	Sept. 30	3 Sept. 30 Mo. We. Fr.	10	15.00
31	Clinical Surgery	Dr. Munro	City Hospital	27	Aug. 1	Sept. 30	1 Sept. 30 Tu. Th. Sat.	10	25.00
32	Genito-Urinary Surgery	Dr. Thorndike	City Hospital		Aug. 1	1 Oct.		10	25.00
33	Minor Surgery	Dr. Lothrop	City Hospital	26	July 2	2 July 31 Daily	Daily	10	20.00
34	Minor Surgery	Dr. Blake	City Hospital	56	June 1	1 July 30	30 Mo. We. Fr.	10	20.00
35	Minor Surgery	Dr. Lund	City Hospital	11	Aug. 1	1 Aug. 2	Aug. 24 Mo. We. Fr.	10	20.00
36	Minor Surgery	Dr. Lund	City Hospital	12	Sept. 3	3 Sept. 28	Sept. 28 Mo. We. Fr.	10	20.00
37	Clinical Obstetries	Dr. C. M. Green	Lying-in Hosp.		June 1	1 Sept. 30			30.00
38	Operative Obstetrics	Dr. Higgins	Medical School	oo	Sept. 4	Sept. 1.	4 Sept. 14 Tu. We. Th. Fr.	4	20.00
39	Operative Obstetrics	Dr. Newell	Medical School	οσ	July 10 July		20 Tu.We.Th.Fr.	4-6	20.00
40	Diseases of Women	Dr. Storer	St. Elizabeth's Hosp.	12	July 3	Aug. 10	3 Aug. 10 Tu. Fr.	3.30	25.00
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No.	Subject.	Instructor.	Place.	No. of Exer- cises.	No. of Exer- cises.	Ends.	Days.	Hour.	Fee.
4	Diseases of Women	Dr. Higgins	City Hospital	13	July	3 July 31	Tu. Th. Sat.	10	20.00
42	Diseases of Women	Dr. Higgins	City Hospital	13	Sept. 1	1 Sept. 29	29 Tu. Th. Sat.	10	20.00
43	Diseases of Children	Dr. Buckingham	Children's Hosp.	18	June	July	Mo. Th. Sat.	10	20.00
44	Diseases of Children	Dr. F. W. White	Infants' Hospital	18	Aug.	Sept.	Tu. Th. Sat.	10	20.00
45	Diseases of the Eye	Dr. Standish	Eye and Ear Inf.	12	July 2	2 July 27	27 Mo. We. Fr.	10	20.00
46	Diseases of the Eye	Dr. Cheney	Eye and Ear Inf.	16	June 12 July		17 Tu. Th. Sat.	6	20.00
47	Diseases of the Eye	Dr. Jack	Eye and Ear Inf.	15	June 11	11 July 13	13 Mo. We. Fr.	6	20.00
48	Diseases of the Ear	Dr. Hammond	Medical School	12	July 2	2 July 30	30 Mo. We. Fr.	3-5	25.00
49	Diseases of the Skin	Dr. Bowen	Mass. Gen. Hosp.	11	July	5 July 27	27 Tu. Th. Fri.	9.30	15.00
20	Diseases of the Skin	Dr. Bowen	Mass. Gen. Hosp.	13	Sept. 4	4 Sept. 28	Sept. 28 Tu. Th. Fri.	9.30	15.00
51	Diseases of the Skin	Dr. C. J. White	Mass. Gen. Hosp.	14	Aug. 2	2 Aug. 31	31 Tu. Th. Fr.	9.30	15.00
52	Diseases of the Throat	Dr. Farlow	City Hospital	12	June 1	June	29 Mo. We. Fr.	10	20.00
53	Diseases of the Nerves	Dr. Walton	Mass. Gen. Hosp.	12	Sept. 3	3 Sept. 28	28 Mo. We. Fr.	11	20.00
54	Diseases of the Nerves	Dr. Taylor	Medical School	20	July 5	Aug. 18	5 Aug. 18 Tu. Th. Sat.	6	25.00
55	Diseases of the Nerves	Dr. Taylor	Long Island Hosp.	25	July 6	6 Aug. 31	Mo. We. Fr.	6	25.00
56	Diseases of the Mind	Dr. Lane	Boston Ins. Hosp.	16	June 8	8 July 31	31 Tu. Fr.	က	20.00
57	Hygiene	Dr. Harrington	Medical School	36	July 2	2 Aug. 11 Daily	Daily	က	50.00
58	Hygiene	Dr. Durgin	Medical School	13	July 2	2 July 30	30 Mo. We. Fr.	8	20.00
59	Bacteriology	Dr. Coolidge	Medical School	30	July 9	9 Aug. 11	11 Daily		30.00



TABULAR VIEWS OF UNDERGRADUATE COURSES.

FIRST YEAR. - First Half-Year.

Monday. Tuesday. Wedder, January. Detober, January. Romber. Section II, Histology. Lab. Room G. Section I, Anatomy. Dissection. Rooms D and Januatomy. 1st and 3d weeks. Section I, Rooms Anatomy. 2d and 4th weeks. Section I, Room G. Section II, Histology. Lab. Room G. November, January. Section I, Histology. Lab. Room G. Section I, Section I, Section I, Room G. Section I, Histology. Lab. Room G.	Wednesday. Friday. Saturday.	Anatomy. L. Room C. Room C. Room C. Section I, Dissection. Room S. Section II, Histology. Lab. Room G.	October, November, December. n. Rooms D and F. Section II, Histology. Laboratory. Room G. January. Got., Nov., Dec. January. Oct., Nov., Dec. Histology. L. Room G. Section I, Rooms D and F. Section II, Room G. Richary.	Histology. I Room C. Room G. Section I, Histology. Lab. Room G. Section II, Anatomy. Lab. Rooms D and F.	October, November, December. Histology. Lab. Room G. Section II, Anatomy. Dissection. Rooms D and F. January.
		Anatomy. L. Room C. November, December. Section I, Dissection. Rooms D and F. Section II, Histology. Lab. Room G.	Anatomy. Dissection. 1st and 3d weeks. Sec 2d and 4th weeks. Se		

Second Half-Year.

			Man	Optional courses in previous studies (to be announced).	
Physiology. Danx. Laboratory. Section I, Room H. Section II, Room B.	February 8-March 6. Laboratory. Section I, Room B. March 6-June 1. Conference. Room A.	Lecture, Room A.	Physiological Chemistry. Daily except Saturdays. February, March, April.	Lectures. Monday and Wednesday, Room A. Lectures. Thesday and Thursday, Room E or A.	Laboratory. Room I. Lecture. Priday, 4 P.M., Room A.
9-11.30	11.30-12	12-12.45		2-3	3-5.30

SECOND YEAR. - First Half-Year.

JANUARY.	Monday, Wednesday, and Friday. Surgery. Clinical Lecture. Burrell. B. C. H.	Tuesday, Thursday, and Saturday.	10.30-1 Monday, Wednesday, and Friday. 1 and 2 weeks. 3 and 4 weeks. Parhology	Laboratory. certain Parasitic Daily. Diseases. Laboratory. Smith. Daily. Daily.	Daily except Saturday.	Surgical Pathology. Laboratory. Nichols. H. M. S.
	9-10	9-1	10.30-1			2-5
D есемвек.	Section I, Room B. H.	్	Pathology of the Nervous	Laboratory. Taylor. H. M. S.		
November.	Laboratory. Daily. Section I, Room B. Section II, Room H.	Lectures. Daily. Room C.	Bacteriology. Lectures. Daily except Saturdays. Room A.	,	Bacteriology. Laboratory. Daily except Saturdays. I, Room B. Section II, Room II.	
OCTOBER.	Pathology.	Pathology. Le	Bacteriology Daily except Sath		Bacteriology. Daily excep Section I, Room B.	
	9-12	12-1	2-3	3-4	4-5	5-6

Second Half-Year.

SATURDAY.	Bandaging (s)	Clinical Medicine Clinic Withington, B. C. H.	Physical Diagnosis (s) G. H. & B. C. H.						
FRIDAY.	Bandaging (s)	1	M. G. If. & B. C. H. Medical Visit (s) M. G. If. & P. C. H. Medical Visit (s) M. G. H. & P. C. H. M. G. H. & P. C. H.	M. C. II. & D. C. III.	Clinical Chemistry Laboratory Wood	Clinical Chemistry L. Wood, Boom A	Feb., Mar. Anatomy. L. T. Dwight, Room C Apr., May Therapeutics. L. Piaff, Room A		
THURSDAY.	Bandaging (s)	Theory and Practice	. н		Clinical Chemistry Laboratory Wood	Clinical Chemistry L. Wood, Room A	0 8	Therapeutics. L. Pfaff, Room A.	
WEDNESDAY.	Bandaging (s)	Clinical Medicine Clinic Withington, B. C. H.	Phys. Diag. (s) M. G. H. & B. C. H. Medical Visit (s) M. G. H. & B. C. H. M. G. H. & B. C. H. M. G. H. & B. C.	Theory and Practice Clinic Cutler. M. G. H.	Clinical Chemistry Laboratory Wood	Feb. Man	m C	Therapeutics. L. Pfaff, Room A	Feb., Mar. Anatomy T. Dwight
TUESDAY.	Bandaging (s)	Theory and Practice Clinic	Physical Diagnosis (s) M. G. H. & B. C. H.	-	Clinical Chemistry Laboratory Wood	Clinical Chemistry L. Wood, Room A.	Feb., Mar. Anatomy. L. T. Dwight, Room C. Apr., May Surgical Pathology R. A. Porter, Room C.	Therapeutics. L. Pfaff, Room A.	Feb., Mar. Anatomy T. Dwight
Monday.	Bandaging (s)	Clinical Medicine Clinic Vickery, M. G. H.	Physical Diagnosis (s) M. G. H. & B. C. H. or Surgical Pathology Demonstration	C. A. Porter, M. G. H.	Feb., Mar. Anatomy. L. T. Dwight, Room C	Rob Var	Therapeutics. L. Pfaff, Room A Apr., May Plarmacology Laboratory	Clinical Chemistry L. Wood, Room A	Feb., Mar. Anatomy T. Dwight
	6	9-10	10-11	11-12	12-1	2-3	3-4	4-5	5-6

THIRD YEAR.

SATURDAY.	Clinical Medicine Clinic Slattnek, M. G. H.	Theory and Practice Clinic Fitz, M. G. H. Pediatrics (s) B. D. and C. H. Clin. Gynaecology (s) B. C. H. Clinical Surgery (s) M. G. H. and B. C. H. S. O. P. D.	Operations M. G. H. M. G. H. Destries (*) B. J. H. JanMay OctJan. Pediatrics. Conta gious Discases (*) McCollom S. D. B. C. H.
FRIDAY.	Clinical Medicine Ward Visit B. C. H.	Clinical Surgery Ward Visit B. C. H. Clin. Gynaecology (*) B. D. till Apr. Clinical Surgery (*) M. G. H and B. C. H. S. O. P. D.	Operations B. C. H. OctJan. gious Discusses (8) McCollom S. D. B. C. H. Sectional Teaching
Типварау.	OctJon. Theory and Practice Clinic Cutler, M. G. H.	Clinical Surgery Clinic Gynaecology (8) Clinic Gynaecology (8) Clinic Gynaecology (8) Clinic Gynaecology (8) Clinical Surgery (8) M. G. H. B. D. till Apr. M. G. H. and M. G. H. and B. C. H. S. O. P. D. B. C. H. S. O. P. D. Clinical Surgery (8) M. G. H. and M. G. H. and M. G. H. and B. C. H. S. O. P. D. B. C. H. S. O. P. D.	Theory and Practice Firz, M. G. H. OctJan. Pediatrics. Conf. gious Diseases (s) McCollom. S. D. B. G. H. Sectional Teaching. Ch. H.
Wednerday.	Clinical Medicine Clinic Shattnek, M. G. H.	Dermafology J. C. White, M. G. H. Clin, Gynaecology (8) B. D. fill Apr. Clinical Surgery (8) M. G. H. and B. C. H. S. O. P. D.	Oct., Nov. Pediatrics No. Grove St. Dec. May. Clinic. I. II. R. No. Grove St. Clin. Obsteries (s) B. L. II. Jan. May
TUBRDAY.	Clinical Medicine Clinic B. C. H.	Clinical Surgery Clinical L. Mondes, Oct. & Nov. Burrell, Dec. May B. C. H. Clin. Gymaecology (*) B. C. H. Clinical Surgery (*) M. G. H. and B. C. H. S. O. P. D.	Oct., Nov. Pediatrics Clinic. Ch. H. Dec., May R. Room E
MONDAY.	Oct. Jan. Theory and Practice Clinic Cutter, M. G. H.	Neurology Clinie Putnam, M. G. H. Clin, Gynnecology (a) B. D. till Apr. Clinical Surgery (s) M. G. H. and B. C. H. S. O. P. D.	Oct. Mar. Pedlatrics. L. Rotch. Room E. Apr., May
	9-10	10-11	11.12

Obstetries. R. Reynolds Room E		Theory and Practice L. Fitz Room E	OctJan. Gynaccology L. or R. Davenport Room E.
Obstetr Reyr Roo			Oct Gynae L. o Dave Roon
Clinical Surgery Conference C. B. Porter M. G. H.		Obstetries. L. W. L. Richardson Room E	OctMan. Gynnecology L. or R. Davenport Room E FebMay Psychiatry. L. Cowles RoomE
Clinical Surgery Ward Visit M. G. H.		Obstetries Conference C. M. Green Room E	Surgery. L. Warren Room C
		Theory and Practice L. Fitz Room E	Dermatology, 1. J. C. White Room E
		Obstetries. L. W. L. Richardson Room E	Surgery. L. Warren Room C
12-1	2-3	3-4	4-5

FOURTH YEAR. - OCTOBER.

		. 0	9			10				11	
Mondon	мопах.	Clinical Medicine Prac. Therapeutics Shattuck, M. G. H.			Ophthalmology Clinic (s) Wadsworth, E.&E.I.	Laryngology Clinic (s, 2 hrs.) DeBlois, B. C. H.		Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Farlow, B. D.	Syphilis Clinic (s) Post, B. D.	Neurology Clinic Putnam, M. G. H.
Thocador	Tuesnay	Otology Clinic (s, 2 hrs.) J. O. Green, E.&E.I.		Gynaecology Clinic C. M. Green, B.C.H.	Ophthalmology Clinic (s) Cheney, E. & E. I.		Dermatology Clinic Bowen, M. G. H.	Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Farlow, B. D.		Diagnosis in Clinical Surgery Clinic C.B.Porter, M.G.H.
Wodnesday	Wednesday.	Surgical Visit B. C. H.			Ophthalmology Clinic (s) Standish, E. & E. I. Jack, B. C. II.	Laryngology Clinic (s, 2 hrs.) DeBlois, B. C. H.		Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Farlow, B. D.	Syphilis Clinic (s) Post, B. D.	
Thursday	Thuishay	Clinical Medicine Clinic Sears, B. C. H.		Otology Clinic (s, 2 hrs.) J.O.Green, E.&E.I.	Ophthalmology Clinic (s) Wadsworth, E.&E.1.	Clinical Surgery Lecture (2 hrs.) Monks, B. C. H.		Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Farlow, B. D.		Neurology Clinical Lecture Walton, M. G. H.
Pridate	Tinas			Gynaecology Clinic C. M. Green, B.C.II.	Ophthalmology Clinic (s) Cheney, E. & E. I. Jack, B. C. H.	Laryngology Clinic (s, 2 hrs.) DeBlois, B. C. II.	Dermatology Clinic Bowen, M. G. H.	Laryngology Clinic (s) Coolidge, M. G. II.	Laryngology Clinic (s) Farlow, B. D.	Syphilis Clinic (s) Post, B. D.	Surgical operations B. C. H.
Noturdon	Batulay	Legal Medicine Autopsy Draper, B. C. H.		Otology Clinic (s, 2 hrs.) J.O.Green, E.&E.I.	Ophthalmology Clinic (s) Standish, E. & E. I.			Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Farlow, B. D.	Surgical operations M. G. H.	Neurology Clinical Lecture Walton, M. G. H.

12	23		က			4	ಬ	7.30	
Clinical Surgery Lecture C. B. Porter, M. G. H.	Exper. Physiol. Lab. (2 hrs.) W.T. Porter, H. M.S.		Ophthalmology Lecture Wadsworth Room A	Anat. of Ear R. (s) Hammond, H. M. S.	Otology Lecture Blake, Room A		Regional Surgery M. H. Rachardson, Room C	Surgreal Emergency Clinic (s) Accident-room M. G. H.	(s) Section of the class.
		Clin. Microscopy Lab. Whitney, H. M. S.		Legal Medicine Lecture Draper, Room A		Orthopedie Surg. Lecture Bradford, H.M.S. or Ch. H.	Surg. Landmarks Lecture Monks, Room A	Surgical Emergency Surgical Emergency Clinic (s) Accident-room M. G. H.	f the class.
Syphilis Lecture Post, B. D.	Exper. Physiol. Lab. (2 hrs.) W.T. Porter, H. M.S.			Anat. of Ear R. (s) Hammond, H. M. S.	Ophthalmology Lecture Wadsworth, Room E		Regional Surgery M. H. Richardson. Room C	Surgical Emergency Surgical Emergency Clinic (s) Accident-room M. G. H. M. G. H.	
Genito-urin. Dis. Clin. Lecture Watson, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.		Legal Medicine Lecture Draper, Room A	Otology Lecture Blake, Room A		Laryngology Lecture Farlow, Room E	Surgical Emergency Clinic (s) Accident-room M. G. H.	-
	Exper. Physiol. Lab. (2 hrs.) W.T.Porter, H. M.S.	Clin. Microscopy Lab. Whitney, H. M. S.		Otology Lecture, Oct. 5 J.O.Green, Room A		Clinical Medicine Conference Room C	Surg. Landmarks Lecture Monks, Room A	Surgical Emergency Clinic (s) Accident-room M. G. H.	Electives are in italics,
					Orthopedic Surg. Clinic (s) Bradford, Ch. H.			Surgical Emergency Clinic (s) Accident-room M. G. H.	.85

(s) Section of the class.

NOVEMBER.

12		23	ဇာ		4	್	7.30
Clinical Surgery Lecture C.B. Porter, M. G. H.	Exper. Physiol. Lab. (2 hrs.) W.T.Porter, II. M.S.		Ophthalmology Lecture Wadsworth, Room A	Otology Lecture Blake or J.O.Green, Room A		Oper. Obstetrics Lect. and Demons. C.M.Green, Room C	Clinic (s) Accident-room M. G. II.
,		Clin. Microscopy Lab. Whitney, H. M. S.	Legal Medicine Lecture Draper, Room A	Orthopedic Surg. Lecture Bradford, Room A or Ch. H.		Dem. Oper. Surg. *C. B. Porter Room C	Clinic (s) Accident-room M.G. H.
Syphilis Lecture Post, B. D.	Exper. Physiol. Lab. (2 lirs.) W. T. Porter, H. M. S.			Ophthalmology Lecture Wadsworth, Room E		Regional Surgery M. H. Richardson Room C	Clinic (s) Accident-room M. G. H.
Genito-urin. Surg. Clin. Lect. Watson, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.	Legal Medicine Lecture Draper, Room A	Otology Lecture Blake or J. O. Green, Room A		Laryngology Lecture Farlow, Room E	Clinic (s) Accident-room M. G. H.
	Exper. Physiol. Lab. (2 hrs.) W.T. Porter, H. M.S.	Clin. Microscopy Lab. Whitney, H. M. S.		Clinical Medicine Conference Room C		Dem. Oper. Surg. C. B. Porter Room C	Clinic (s) Accident-room M. G. H.
				Orthopedic Surg. Clinic (s) Bradford, Ch. II.			Clinic (s) Accident-room M. G. II.

* Repetition courses by the students will take place in the evening at the Medical School at hours to be announced.

DECEMBER.

				Orthopedic Surg. Clinic (s) Bradford, Ch. H.			Clinic (s) Accident-room M. G. II.
	Exper. Physiol. Lab. (2 hrs.) W.T. Porter, H.M.S.	Clin. Microscopy Lab. Whitney, H. M. S.		Clinical Medicine Conference Room C		Dem. Oper. Surg. C. B. Porter. Room C	Clinic (s) Accident-room M. G. II.
Genito-urin. Surg. Clin. Lect. Watson, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.	Legal Medicine Lecture Draper, Room A	Otology Lecture Blake or J. O. Green Room A		Laryngology Lecture Farlow, Room E	Clinic (s) Accident-room M. G. H.
Syphilis Lecture Post, B. D.	Exper. Physiol. Lab. (2 hrs.) W. T. Porter, H. M. S.					Regional Surgery M. H. R.chardson Room C	Clinic (s) Accident-room M. G. H.
		Clm. Microscopy Lab. Whitney, H. M. S.	Legal Medicine Lecture Draper, Room A	Orthopedic Surg. Lecture Bradford, Room A		Dem. Oper. Surg. C. B. Porter Room C	Clinic (s) Accident-room M. G. H.
Clinical Surgery Lecture C. B. Porter, M. G. H.	Exper. Physiol. Lab. (2 hrs.) W.T.Porter, H.M.S.			Otology Lecture Blake or J. O. Green Room A		Oper. Obstetrics Lect. and Demon. C.M.Green, Room C	Clinic (s) Accident-room M. G. II.
12		23	က		4	ಬ	7.30

ANUARY.

	Monday.	Tuesday.	Wednesday.			Friday.
٥.	Clinical Medicine Prac. Therapeutics Shattuck, M. G. II.	Otology Clinic (s, 2 lrrs.) Blake, E. & E. I.	Surgical Visit B. C. II.	Clinical Medicine Clinic Sears. B. C. II.		Gynaecology Clinic C. M. Green, B. C. H.
		Gynaecology Clinic C. M. Green, B. C. H.		Otology Clinic, (s, 2 hrs.) Blake, E. & E. I.		
	Ophthalmology Clinic (s) Wadsworth E. & E. I.	Ophthalmology Clinic (s) Cheney, E. & E. I.	Ophthalmology Clinic (s) Standish, E. & E. I. Jack, B. C. H.	Ophthalmology Clinic (s) Wadsworth E. & E. I.	Ophtl Cl Cheney Jack	Ophthalmology Clinic (s) Cheney, E. & E. I. Jack, B. C. H.
10	Laryngology Clinic (s, 2 lns.) DeBlois, B. C. H.		Laryngology Clinic (s, 2 hrs.) DeBlois, B. C. H.		Lary Clinic DeBlois	Laryngology Clinic (s, 2 hrs.) DeBlois, B. C. H.
		Dermatology Clinic Bowen, M. G. H.		Clinical Surgery Lecture (2 hrs.) Burrell, B. C. H.	Derma Cli Bowen,	Dermatology Clinic Bowen, M. G. H.
	Surgical Clinic M. G. H.					
	Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Coolidge, M. G. H.	Laryngology Clinic (s) Coolidge, M. G. II.	Laryngology Clinic (s) Coolidge, M. G. II.	cology c (s) M. G. H.
11	Syphilis Clinic (s) Post, B. D.	Diagnosis in Clinical Surgery. Clinic C. B. Porter M. G. H.	Syphilis Clinic (s) Post, B. D.	\	Syphilis Clinic (s) Post, B. D.	ullis c (s) B. D.
	Neurology Clinic Putnam, M. G. H.	•		Neurology Clin. Lect. Walton, M. G. II.	Surgical oper. B. C. H.	l oper. H.

	iol).	opy I. S.		caal Orthopedic Surg. Clinic (s) Bradford, Ch. H.			Clinic (s) Accident-room M. G. H.
	Exper. Physiol. Lab. (2 hrs.) W. T. Porter, H.M.S.	Clin. Microscopy Lab. Whitney, H. M. S.		Clinical Medical Conference Room C			Clinic (s) Accident-room M. G. H.
Genito-urin. Surg. Clin. Lect. Watson, B. C. H.	Clin. Microscopy Lab. Whitney, H. M. S.		Legal Medicine Lecture Draper, Room A		Regional Surgery M. H. Richardson Room C	Laryngology Lecture Farlow, Room E	Clinic (s) Accident-room M. G. H.
Syphilis Lecture Post, B. D.	Exper. Physiol. Lab. (2 hrs) W. T. Porter, H.M.S.					Oper. Obstetrics Demonstrations (s, 2 hrs.) H. M. S.	Clinic (s) Accident-room M. G. H.
		Clin. Microscopy Lab. Whitney, H. M. S.	Legal Medicine Lecture Draper, Room A	Orthopedic Surg. Lecture Bradford, Room A	-	Regional Surgery M. H. Richardson Room C	Clinic (s) Accident-room M. G. H.
Clinical Surgery Lecture C. B. Porter, M. G. H.	Exper. Physiol. Lab. (2 hrs.) W. T. Porter, H.M.S.					Oper. Obstetrics Lect. & Dem. (1 hr.) C.M. Green, Room C Demonstrations (s, 1 hr.)	Clinic (s) Accident-room M. G. H.
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FEBRUARY.

	Monday. I	Clinical Medicine Prac. Therapeutics Shattuck, M. G. H. G. M. G	Otology Clinic (2 hrs.) .O. Green, E. & E. I.		. Dea	Surgical Clinic M. G. H. Brad	Diagn Surg C. B. P.		
Of material and the control of the state of	Tuesday.	Gynaecology Clime C. M. Green, B. C. H.	J.	M	Dermatology Clinic Bowen, M. G. II.	Orthopedic Surg. Clinic Bradford, Ch. H.	Diagnosis in Clinical Surgery. Clinic. C. B. Porter, M.G. H.		
rephoani.	Wednesday.	Surgical Visit B. C. H.	Otology Clinic (2 hrs.) J.O. Green, E. & E. I.	Ophthadmology Clinic (2 hrs.) Wadsworth, E.&E.I.			Clinical Medicine Practical Exercise Clinic (2 hrs.) R. C. Cabot, M.G.H.		
	Thursday.	Clinical Medicine Gynaecology II. Jackson, B. C. II. C. M. Green, B. C. H.		Clinical Surgery Lecture (2 hrs.) Burrell, B. C. H.	ŧ				-
	Friday.	Gynaecology Clinic C. M. Green, B. C. H.	Otology Clinic (2 hrs.) J. O. Green, E. & E. I.		Dermatology Clinic Bowen, M. G. II.		Clinical Medicine Practical Exercise Clinic (2 lns.) R. C. Cabot, M.G.H.		Surgical operations B. C. H.
	Saturday.			Ophthalmology Clinic (2 hrs.) Wadsworth, E. & E. I.			Clinical Medicine Practical Exercise Clinic (2 hrs.) II. Jackson, B. C. H.	Surgical operations M. G. H.	

				Psychiatry Clinic Lane, B. I. H.	Orthopedie Surg. Clinic Bradford, Ch. H.			Clinic (s) Accident-room M. G. H.
Infectious Dis. Clinie (s) McCollom, B. C. H.		Exper. Physiol. Lab. (2 hrs.) W.T.Porter, H.M.S.	Clin. Microscopy Lab. Whitney, H. M. S.	Municip, Sanita, Lecture Durgin, Room A	Climead Medicime Conference Room C		Hygiene Lecture Harrington, Room A	Clinie (s) Accident-room M. G. H.
Genito-urin. Surg. Clin. Lect. Watson, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A			Hygiene Lecture Harrington, Room A	Clinie (s) Accident-room M. G. H.
	Neurology Clinic Knapp, B. C. H.	Ctin. Microscopy Exper. Physiol. Lab. Lab. W.T. Porter, H.M.S.		Municip. Sanita. Lecture Durgin, Room A	Ovar. Tumors Lecture Homans, Room E		Oper. Obstetrics Dem. (s, 2 hrs.) H. M. S.	Clinie (s) Aecident-room M. G. H.
Infectious Dis. Clinic (s) McCollom, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A	Orthopedic Surg. Clinic Bradford, Ch. II.	Gynaecology Conference C.M.Green, Room C	Hygiene Lecture Harrington, Room A	Clinic (s) Aecident-room M. G. H.
Clinical Surgery Lecture M. H. Richardson M. G. H.	Neurology Clinic Knapp, B. C. II.	Exper. Physiol. L.ab. (2 hrs.) W. T. Porter, H.M.S.	The state of the s	Psychiatry Clinic Cowles, McL. H.			Oper. Obstetrics Dem. (8, 2 hrs.) H. M. S.	Clinic (s) Accident-room M. G. H.
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MARCH.

Saturday.			Ophthalmology Clinic (2 hrs.) Wadsworth, E.&E.I.			Clinical Medicine Practical Exercise Clinic (2 hrs.) H. Jackson, B. C. H.	Surgical oper. M. G. H.	
Friday	Gynaecology Clinic C. M. Green, B.C.H.	Otology Clinic (2 hrs.) J.O.Green, E.&E.I.		Dermatology Clinic Bowen, M. G. II.		Clinical Medicine Practical Exercise Clinic (2 hrs.) R. C. Cabot, M. G. H.		Surgical oper. B. C. H.
Thursday.	Clinical Medicine Clinic H. Jackson, B. C. H. Green, B.C.H.		Clinical Surgery Lecture (2 hrs.) Burrell, B. C. H.					
Wednesday.	Surgical Visit B. C. II.	Otology Clinic (2 hrs.) J.O.Green, E.&E.I.	Ophthalmology Clinic (2 hrs.) Wadsworth, E.&E.I.			Clinical Medicine Practical Exercise Clinic (2 hrs.) R. C. Cabot, M. G. H.		
Tuesday.	Gynaecology Clinic C. M. Green, B.C.H.			Dermatology Clinic Bowen, M. G. H.	Orthopedic Surg. Clinic Bradford, Ch. H.	Diagnosis in Clinical Medicine Clinical Surgery Clinic (2 hrs.) C.B. Porter, M.G.II. R. C. Cabot, M. G. H.		
Monday.	Clinical Medicine Prac. Therapeutics Shattuck, M. G. H.	Otology Clinic (2 hrs.) J.O.Green, E.&E.I.			Surgical Clinic M. G. H.	,		
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				Psychiatry Clinic Lane, B. I. H.	Orthopedic Surg. Clinic Bradford, Ch. H.			Clinic (s) Accident-room M. G. H.
Infectious Diseases Clinic (s) McCollom, B. C. H.		Exper. Physiol. Lab. (2 lrs.) W. T. Porter, II M. S.	Clin. Mcroscopy Lab. Whitney, H. M. S.	Municip. Sanita. Lecture Durgin, Room A	Clinical Medicine Conference Room C		Hygiene Lecture Harrington, Room A Harrington, Room A	Clinic (s) Accident-room M. G. II.
Genito-urin. Surg. Clin. Lect. Watson, B. C. II.		Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A			Hygiene Lecture Harrington, Room A	Clinic (s) Accident-room M. G. H.
Neurology Clinic Knapp, B. C. H.		Exper. Physiol. Lab. (2 hrs.) W. T. Porter, H.M.S.		Municip. Sanita. Lecture Durgin, Room A	Ovar. Tumors Lecture (2 wks.) Homans, Room E			Clinic (s) Accident-room M. G. II.
Infectious Diseases Clinic (s) McCollom, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A	Orthopedic Surg. Clinic Bradford, Ch. H.	Gynaecology Conference C.M.Green, Room C	Hygiene Lecture Harrington Room A	Clinic (s) Accident-room M. G. II.
Clinical Surgery Lecture M. H. Richardson M. G. H.	Neurology Clinic Knapp, B. C. H.	Exper. Physiol. Lab. (2 lns.) W. T. Porter, H.M.S.		Psychiatry Clinic Cowles, McL. H.				Clinic (s) Aecident-room M. G. H.
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APRIL.

Administration of the control of the	Saturday.	Otology Clinic (2 hrs.) Blake, E. & E. I.		Ophthalmology Clinic (2 hrs.) Wadsworth E. & E. I.			Clinical Medicine Practical Exercise Clinic (2 hrs.) II. Jackson, B. C. H.	Surgical oper. M. G. H.	7
	Friday.	Gynaecology Clinic C. M. Green, B. C. H.			Dermatology Clinic Bowen, M. G. II.		Clinical Medicine Practical Exercise Clinic (2 hrs.) R. C. Cabot, M. G. H. H. Jackson, B. C. H.		Surgical oper. B. C. H.
	Thursday.	Clinical Medicine Clinic Clinic H. Jackson, B. C. H. C. M. Green, B. C. H	Otology Clinic (2 lars.) Blake, E. & E. I.	Clinical Surgery Lecture (2 hrs.) Burrell, B. C. H.					
AL MID.	Wednesday.	Surgical Visit B. C. H.		Ophthalmology Clinic (2 hrs.) Wadsworth E. & E. I.	·		Clinical Medicine Practical Exercise Clinic (2 hrs.) R. C. Cabot, M. G. H.		
	Tuesday.	Gynaecology Clinic C. M. Green, B. C. H.	Otology Clinic (2 hrs.) Blake, E. & E. I.		Dermatology Clinic Bowen, M. G. H.	Orthopedic Surg. Clinic Bradford, Ch. II.	Diagnosis in Clinical Clinical Medicine Surgery Clinic Clinic Clinic (2 lrrs.) C. B. Porter, M.G.H. R. C. Cabot, M. G. H		
	Monday.	Clinical Medicine Prac. Therapeutics Shattuck, M. G. H.			Surgical Clinic M. G. H.				
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				Psychiatry Clinic Lane, B. I. H.	Orthopedic Surg. Clinic Bradford, Ch. H.			Clinic (s) Accident-room M. G. H.
Infectious Diseases Clinic (s) McCollom, B. C. H.		Exper. Physiol. Lab. (2 hrs.) W.T. Porter, II. M.S.	Clin. Microscopy Lab. Whitney, H. M. S.		Clinical Medicine Conference Room C		Hygiene Lecture Harrington, Rm. A	Clinic (s) Accident-room M. G. H.
Genito-urin. Surg. Clinical Lecture Watson, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A			Hygiene Lecture Harrington, Rm. A	Clinic (s) Accident room M. G. H.
Neurology Clinic Knapp, B. C. H.		Exper. Physiol. Lab. (2 hrs). W.T. Porter, H. M.S.		·		٥		Clinic (s) Accident-room M. G. H.
Infectious Diseases Clinic (s) McCollom, B. C. H.		Clin. Microscopy Lab. Whitney, H. M. S.	to to	Comp. Et. Infec. Dis. Lecture Smith, Room A	orthopedic Surg. Clinic Bradford, Ch. H.	Gynaecology Conference C. M. Green, Room C	Hygiene Lecture Harrington, Rm. A	Clinic (s) Accident-room M. G. H.
Clinical Surgery Lecture M. H. Richardson M. G. H.	Neurology Clinic Knapp, B. C. H.	Exper. Physiol. Lab. (2 hrs.) W.T. Porter, H.M. S.		Psychiatry Clinic Cowles, McL. H.				Clinic (s) Accident-room M. G. H.
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MAY.

• 1 474	Wednesday, Friday, Saturday.	Surgical Visit Clinical Medicine Clinic Clinic (2 lus.) B. C. H. H. Jackson, B. C. H.	Otology Clinic (2 hrs.) Blake, E. & E. I. C. M. Green, B. C. II.	Ophthalmology Clinical Surgery Clinic (2 hrs.) Wadsworth, E.&E.I. Burrell, B.C. H.	Dermatology Clinic Bowen, M. G. H.		Clinical Medicine Practical Exercise Clinic (2 hrs.) R. C. Cabot, M. G. H. Clinic (2 hrs.) R. C. Cabot, M. G. H. Clinic (2 hrs.) R. C. Cabot, M. G. H.	Surgical oper. M. G. H.	Surgical oper. B. C. H.
	Tuesday.	Otology Clinic (2 hrs.) Blake, E. & E. I.	Gynaecology Clinic C. M. Green, B. C. H.	M	Dermatology Clinic Bowen, M. G. H.	Orthopedic Surg. Clinic Bradford, Ch. H.	Diagnosis in Clinical Surgery. Clinic C. B. Porter, M.G.H. R		
	Monday.	Clinical Medicine Prac. Therapeutics Shattuck, M. G. II.			Surgical Clinic M. G. H.				
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				Orthopedic Surg. Clinic Bradford, Ch. H.			Clinic (s) Accident-room M. G. H.
Infectious Diseases Clinic (s) McCollom, B. C. H.	Exper. Physiol. Lab. (2 hrs.) W. T. Porter, H.M.S.	Clin. Microscopy Lab. Whitney, H. M. S.		Clinical Medicine Conference Room C		Hygiene Lecture Harrington, Room A	Clinic (s) Accident-room M. G. H.
Genito-urin. Surg. Clin. Lect. Watson, B. C. H.	Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A			Hygiene Lecture Harrington, Room A	Clinic (s) Accident-room M. G. H.
Neurology Clinic Knapp, B. C. H.	Exper. Physiol. Lab. (2 hrs.) W. T. Porter, H.M.S.						Clinic (s) Accident-room M. G. H.
Infectious Diseases Clinic (s) McCollom, B. C. H.	Clin. Microscopy Lab. Whitney, H. M. S.		Comp. Et. Infec. Dis. Lecture Smith, Room A	Orthopedic Surg. Clinic Bradford, Ch. II.	Gynaecology Conference C.M.Green, Room C	Hygiene Lecture Harrington, Room A	Clinic (s) Accident-room M. G. H.
Neurology Clinic Knapp, B. C. H.	Exper. Physiol. Lab. (2 lns.) W. T. Porter, H. M.S.						Clinic (s) Accident-room M. G. II.
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DEGREES.

On Commencement Day, June 27, 1900, degrees were conferred as follows:—

M. D.

William Thomas Bailey, B.L. (Dartmouth Coll.) 1891.

Manak Bamji, B.Sc., L.C.E., (Bombay Univ.) 1889.

James Arthur Barnes, A.B. (Holy Cross Coll.) 1895.

Charles Sewall Barrell.

Edward Francis Washburn Bartol, A.B. 1896.

Charles Ellsworth Bedell.

Theodore Chapin Beebe, Jr., A.B. 1896.

Edward Jones Belt.

Stephen Albert Bergin, A.B. (Boston Coll.) 1896.

Roland Walker Brayton.

Joseph Thomas Louis Brennan.

Richard Emmor Brenneman.

Laurence Ambrose Brock, A.B. (Boston Coll.) 1895.

Percy Emerson Brown.

William Joseph Campbell, A.B. (Boston Coll.) 1896.

Charles Stanislaus Capelle, M.D. (Boston Univ.) 1897.

William Francis Carmody, A.B. (Holy Cross Coll.) 1885.

Ernest Linwood Cheney.

John Darling Churchill.

Ezra Eames Cleaves.

Harry Radcliffe Cloudman.

Simon Francis Cox, A.B. (Boston Coll.) 1896.

Charles Frederick Deacon, A.B. (Brown Univ.) 1896.

William Nelson Decker.

Charles Frederick Dole.

Edward Augustine Drummond.

Alexander Crane Eastman, A.B. (Amherst Coll.) 1896.

Robert Leonard Emerson, A.B. 1894.

Irving Jewell Fisher.

Charles Norman Fiske.

Leo Victor Friedman, A.B. 1895.

Lazarus Golden.

Thomas Francis Hanna, A.B. (Boston Coll.) 1896.

Everett Vinton Hardwick.

John Francis Harkins, A.B. (Holy Cross Coll.) 1896.

Joseph Storer Hart.

William Winn Hartwell, A.B. (Williams Coll.) 1896.

William Oakes Hewitt.

George Pratt Hunt.

James Marcus Jackson.

Samuel Lees Joslin.

Joseph Henry Kenealy.

Maxwell Benedict King.

John Greenleaf Whittier Knowlton, A.B. (Bowdoin Coll.) 1895.

Benoni Mowry Latham.

Arthur Thornton Legg.

William Elston Leighton, A.B. (Bowdoin Coll.) 1895.

Walter Maynard Lippincott.

Freeman Lamprey Lowell, A.B. 1894.

Frederick Joseph McKechnie, A.B. (Holy Cross Coll.) 1896.

William Watson McKibben, A.B. 1896.

Thomas Mitchell MacLachlan.

William Fletcher McNutt, Jr., B.s. (*Univ. of California*) 1897.

Thomas Henry Maguire.

George Arnold Matteson, A.B. (Brown Univ.) 1896.

John Albert Morgan.

John Henry Mullen, A.B. (Boston Coll.) 1896.

Solomon Myers.

James Nightingale.

Edward Stark Parker, A.B. (*Brown Univ.*) 1896.

Richard Richardson Pettigrew, M.D. (Long Island Coll. Hosp.) 1898.

Leonard Holden Pote.

William Percival Pritchard.

Edwin Willis Rich, s.B. 1897.

Joseph Henry Saunders, A.B. (*Tufts Coll.*) 1895.

Luther Dimmick Shepard, Jr., A.B. 1896.

Ames Wilsworth Slate.

Charles Marsh Spalter.

Joseph Lawrence Sullivan.

James Taylor, Jr.

John Danforth Taylor.

John Willard Thomas, A.B. 1895.

Ralph Leroy Thompson, A.B. (Bates Coll.) 1896.

George Louis Vogel.

John Thomas Ward.

Alva Harding Warren.

Clifford Allen White, A.B. 1896.

Frank Lyon Wood.

Manong Garabet Yardumian.

Joaquin Zavala, Jr.

M.D. cum laude.

Charles Fenner Atwood, A.B. 1896. Irving Reed Bancroft, Ph.B. (*Tufts Coll.*) 1897.

Lynn Moore Barnes, A.B. 1896.

Ralph Emerson Bicknell.

William Ernest Blodgett, A.B. 1896.

Charles Sawyer Bryant, A.B. 1896.

Fred Bryant, A.B. (Colby Univ.) 1895.

Walter Thomas Burke, PH.G. (Mass. Coll. of Pharm.) 1891.

Melvin Paige Burnham.

Walter Bradford Cannon, A.B. 1896, A.M. 1897.

George Lehman Collins, A.B. 1896. Richard Collins, A.B. (*Colby Univ.*) 1896.

John Matthew Connolly, A.B. (Holy Cross Coll.) 1890, A.M. (ibid.) 1892.

Sumner Coolidge, A.B. 1883.

Herbert Cerdá de Vilarrestau Cornwell, A.B. 1897.

Everett Larcom Creesy, A.B. 1896.

George Strong Derby, A.B. 1896.

Charles Hunter Dunn, A.B. 1896. Robert Patrick Fair.

William Fletcher.

Charles Benjamin Fuller, A.B. (Colby Univ.) 1896.

George Warren Gardner, A.B. (Brown Univ.) 1894.

Alfred Henry Gould, A.B. 1896.

Walter Alden Griffin, A.B. 1897.

Carl Lester Magnus Holmberg, A.B. (Brown Univ.) 1896.

William Wescott Howell, A.B. 1896.

Merrick Lincoln, A.B. 1896.

Frederick Taylor Lord, A.B. 1897.

William James McCausland.

Thomas Joseph Henry McCormick, A.B. 1897.

William Henry McMann, A.B. 1896. Louis Guy Mead, A.B. 1896.

Paul Stearns Mertins, A.B. (Washington & Lee Univ.) 1896.

John Lambert Nicholson, M.D. (Tulane Univ.) 1898.

Chauncey Williams Norton, A.B. 1896, A.M. 1897.

Oscar Richardson.

Henry Lindsay Sanford, A.B. 1896. David Daniel Scannell, A.B. 1897. Albert Ernest Small, A.B. 1896. Howard Harry Smith, Ph.G. (Mass. Coll. of Pharm.) 1895.

Albert Edward Steele.

John Joseph Sullivan.

Michael Henry Sullivan.

Henry Marshall Swift, A.B. 1894.

Maurice Paul Octave Vejux-Tyrode.

Richard Goodwin Wadsworth, A.B. 1896.

Henry Stanley Warren.

John Warren, A.B. 1896.

Frederic Bradlee Winslow, A.B. 1895, A.M. 1896.

Harry Gage Wyer, A.B. 1896.

ADMISSION EXAMINATION.

June, 1900.

CHEMISTRY.

[Laboratory note-books (qualitative analysis), properly endorsed, must be handed in at this examination.]

- 1. How long have you studied chemistry? Where? What courses have you taken? What books have you used?
- 2. Define the following: precipitation; crystallization; simple solution; chemical solution; saturated solution.
- 3. Write the equations representing the process of manufacture of (a) hydrogen; (b) hydrochloric acid; (c) nitric acid; (d) hydrogen sulphide.
- 4. How many grams of NaCl are required to precipitate all the silver from a solution containing 340 grams Ag N O_3 ?

 $AgNO_3 + NaCl = AgCl + NaNO_3.$

- 5. What are the sources of phosphorus? Describe the two varieties.
- 6. Give the formulae, together with a brief description, of the oxides of nitrogen.
- 7. Describe two of the following: Mg S O₄, K₂Mn₂O₈, Hg Cl₂, Cu S O₄, Ag N O₃.

Ag = 108; Na = 23; N = 14; O = 16; Cl = 35.5.

EXAMINATION PAPERS.

(Annual Examinations, 1900.)

First Year Studies.

ANATOMY. — Professor Dwight.

- 1. Describe the clavicle.
- 2. Describe the atlas.
- 3. Describe the diaphragm.
- 4. Describe the thyroid gland.
- 5. Describe the Spigelian lobe of the liver.
- 6. What is supplied by the superior mesenteric artery?
- 7. Give the course and relations of the common carotid artery.
- 8. Describe the joint at the symphysis pubis.

HISTOLOGY. — Professor Minor.

[Each student is given sections numbered to correspond with the questions below. He is expected to make simple drawings only, but sufficient to show that he has correctly identified the parts. Any student who draws tissues or structures, not shown in his preparation, will be considered to have failed in all his answers.]

- 1. From what organ is the section? In what plane is it made? Make a drawing to show the distribution of the muscle fibres, and the directions in which they run.
- 2. What is the organ? Draw and name all the layers upon its outer surface.
 - 3. Draw and describe the principal blood vessels in the section.
 - 4. Draw and name the two principal kinds of cell shown in the section.
- 5. What is the section? How cut? Draw and name the largest cells shown in the section.

PHYSIOLOGY. — Professor Bowditch.

[Number the answers to the questions without copying the questions themselves. Do not number the pages of the book. Answer the questions in order, writing on each page in succession.]

- 1. Why is the combustion warmth of an article of food not an absolute measure of its nutritive value?
- 2. Explain the nervous and muscular mechanism of deglutition.

- 3. Explain the heart-sounds and state their relations to ventricular systole and diastole.
- 4. How do the contractions of striped, smooth, and cardiac muscles differ from one another?
- 5. Give evidence of the importance of muscles as heat producing organs.
- 6. Explain the importance of afferent nerve impulses for the production of voluntary motions.
- 7. What is meant by the "internal secretion" of glands? Give examples.
- 8. How are positive and negative after images produced?
- 9. Mention the excreting organs of the body in the order of their importance and name the principal substances excreted by each.
- 10. Why and how does the body absorb oxygen from the air?

PRACTICAL EXAMINATION IN PHYSIOLOGY.

[Each student is required to make either one of the two experiments bearing his number and to write an account of his observations on the blank furnished herewith. Where the results of the experiments are not expressed in a graphic record they must be demonstrated to the instructor.

- 1. (a) Show the effect of inhibition of the heart on arterial pressure in the frog.
 - (b) Show the influence of temperature on the form of the contraction wave.
- 2. (a) Show the vasomotor functions of the spinal cord.
 - (b) Measure the demarcation current (current of injury) of nerve and muscle.
- 3. (a) Furnish experimental evidence for an explanation of the auriculo-ventricular interval.
 - (b) Prove that the galvanic current stimulates during the whole time of its passage through an irritable tissue.
- 4. (a) Show that a constant stimulus may cause periodic contraction.
 - (b) Show the influence of fatigue on muscular contraction.
- 5. (a) Prove the existence of tonic contraction of muscle.
 - (b) Measure the speed of the contraction wave.
- 6. (a) Show the function of the anterior spinal nerve-roots.
 - (b) Prove that the extensibility of muscle is increased in tetanus.
- 7. (a) Show the influence of an increase in peripheral resistance on the blood pressure in the frog.
 - (b) Demonstrate the current of action in muscle or nerve.
- 8. (a) Demonstrate the limits of the refractory period and the existence of the compensatory pause.
 - (b) Prove that the demarcation current (current of injury) may act as a stimulus
- 9. (a) Determine the effect of stimulation of the vagus on the beat of the ventricle.
 - (b) Demonstrate polar stimulation by the galvanic current.

- 10. (a) Show evidence that the ventricular contraction wave may be transmitted by muscular tissue.
 - (b) Compare an isometric contraction with an isotonic contraction.
- 11. (a) Demonstrate the inhibition of reflex action in the frog.
 - (b) Prove the discontinuous nature of tetanic contraction.
- 12. (a) Show that the fields of distribution of sensory nerves overlap.
 - (b) Show the influence of load on the work done by skeletal muscle.

PHYSIOLOGICAL CHEMISTRY. — Professor W. B. Hills.

- 1. Describe in detail the digestion, absorption, and assimilation of the carbohydrates.
- 2. Give the composition of the oils and fats. What conditions favor their emulsification?
- 3. What are the proteid constituents of the blood? Which of these exist in the plasma? In the serum?
- 4. Compare the microscopic characteristics of whole milk, skimmed milk, and colostrum. What are the most essential differences, from a quantitative standpoint, between woman's and cow's milk?
- 5. What is the reaction of urine (the mixed normal urine of 24 hours), blood, saliva, gastric juice, pancreatic juice? What is the cause of the reaction in each case?
 - 6. What are the important functions of the liver cells?
- 7. In addition to sugar, what constituents (normal or abnormal) of the urine may cause a reduction upon performing Fehling's test? How would you proceed, in any given case, to prove the presence or absence of sugar?

LABORATORY EXAMINATION.

Each student was given the following: —

- 1. A specimen of pathological urine for chemical and microscopical examination. It was required, in each case, to estimate urea, and either chlorine or sugar, quantitatively.
- 2. A piece of cloth with an adherent stain. Is the stain a blood stain, or not?
- 3. A solution to be analyzed for carbohydrates, proteids, gastric acids, and pepsin.

Second Year Studies.

ANATOMY. — Professor Dwight.

- 1. The relations of the stomach.
- 2. The general plan of the fasciæ of the male pelvis and perinæum.
- 3. Describe a section of the spinal cord at the cervical enlargement, giving the position of the chief tracts.
- 4. The relations of the parotid gland.

BACTERIOLOGY. - Professor Ernst.

- 1. Describe the methods of preparing nutrient gelatine.
- 2. Describe fully the methods for examining a specimen supposed to contain the gonococcus.
- 3. What are the characteristics of the pneumobacillus?

PATHOLOGY. - Professor Councilman.

These questions are to be briefly and clearly answered. Information of an irrelevant character is not desired.

- 1. Describe the changes in the rabbit's ear which follow within 24 hours the application for 3 minutes of water at 54° C. Give both the macroscopic and microscopic alterations.
- 2. What determines the character of the lesion following an acute infection?
- 3. How would you distinguish between cloudy swelling, fatty, and amyloid degeneration of the kidney?
- 4. What are some of the chief causes of atrophy? Give an example of atrophy of an organ combined with increase in size.
- 5. What is the essential cell lesion found in a swollen Peyer's patch in typhoid fever?
- 6. Describe the process of organization of an exudation and the cells which are concerned in it.
- 7. Fibroma. Give macroscopic and microscopic characteristics, origin and varieties.
- 8. What are the macroscopic and microscopic features of a tumor which would lead you to regard it as malignant?
 - 9. Tuberculosis of the kidney. Forms, mode of infection, etc.
- 10. Describe the pathological conditions in the liver in atrophic interstitial hepatitis.

CLINICAL CHEMISTRY. — Professor Wood.

- 1. Importance of a quantitative estimation of urea?
- 2. What variations from the normal do we find in the quantity of urine in the different stages of the various forms of kidney disease?
- 3. If the quantity of urine remains steadily for one or two weeks at approximately 3000 cc., and contains a slight trace of albumin, what pathological conditions are possible, and how distinguish between them?
 - 4. Character of the urinary sediment in a case of chronic prostatitis?
- 5. Discuss the following specimens, giving reasons for the inferences which may be drawn from them:—

CASE A.

Slightly pale. Slightly acid. Sp. Gr. = 1016. Slight sediment.

Uph. = —.
$$\dot{\overline{U}}$$
. = 1.13%. Cl. = 0.285%. E. P. = —. Ind. = sl. — $\dot{\overline{U}}$. = 0.056%. Sf. = n. A. P. = —. Albumin = $\frac{1}{6.0}$ %. Bile and sugar absent.

Sediment = numerous hyaline and finely-granular casts and few coarsely-granular casts; an occasional cast with granular renal cells and an occasional blood and oil globule adherent; few granular and slightly fatty renal cells.

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Amount of urine in 24 hours = 2320 cc.
"" urea "" = 26.216 grms.
"" uric acid "" = 1.30 "
"" chlorine "" = 4.29 "
"" phosphoric acid "" " = 3.64 "
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6. CASE B.

Normal color. Acid. Sp. Gr. = 1016. Considerable sediment.

Albumin = trace. No bile or sugar.

Sediment = numerous pus corpuscles, partly in clumps with small and medium-sized round cells; numerous small round cells, some of which are coarsely-granular, and some fatty; few blood globules; an occasional compound granule cell; excess of squamous cells; an occasional hyaline, granular, and brown-granular cast.

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Amount of urine in 24 hours = 960 cc.
"" urea "" = 15.168 grms.
"" uric acid "" = 0.643 ""
"" chlorine "" = 3.84 "
"" phosphoric acid "" = 1.51 ""
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- 7. What is the object of the addition of the Loeffler's stain to the process of blood staining? Essential characteristic of the blood of anaemia, and in what way is it manifested? Define leucocytosis.
- 8. Sources, symptoms, and post-mortem appearances in a case of acute phosphorous poisoning.

MATERIA MEDICA AND THERAPEUTICS —Asst. Professor Pfaff.

- 1. Give the pharmacological action of strychnine and state the rational indications for its use.
 - 2. What is Heroin? Dionin? Give their uses.
- 3. State the action of the obromine and compare it with caffeine. Enumerate the different preparations of caffeine and tell which are preferable for internal use and give your reasons for it.
 - 4. Action of subnitrate of bismuth?
- 5. Give the local and constitutional action of the alkalies and their indication for use.
- 6. Write prescriptions for the following, avoiding abbreviations, and giving full directions for use: (1) Quinine hydrochlorate; (2) arsenic; (3) sodium salicylate; (4) santonin; (5) pilocarpine; (6) lobelia; (7) calomel.
 - 7. General methods of treatment of heart diseases.
 - 8. Use of hyoscyamine.

Third Year Studies.

THEORY AND PRACTICE. — Professor Fitz.

- 1. Discuss the etiology of acute articular rheumatism.
- 2. The dietetic treatment of saccharine diabetes and its limitations.
- 3. The diagnosis and treatment of intestinal perforation in typhoid fever.
- 4. The value of the tuberculin test in the diagnosis of possible local tuberculosis.
- 5. The diagnosis and treatment of acute pericarditis.
- 6. The treatment of cardiac dropsy.
- 7. The significance of delayed resolution in pulmonary hepatization.
- 8. The sources of hematemesis and their differential diagnosis.
- 9. The diagnosis of an incarcerated calculus in the gall bladder.
- 10. The relation of the term Bright's Disease to affections of the kidney.

PEDIATRICS. — Professor ROTCH.

[Give the differential diagnosis of the following case. More credit will be given to an intelligent discussion of the case than to a correct diagnosis unsupported by such discussion.]

1. A male infant, nine months old, entered the hospital March 29, with the following rather doubtful history, as the parents were ignorant and their observations necessarily unreliable. The parents were healthy. The infant was a first child and was premature about two weeks. The digestion was always poor.

It was fed on condensed milk. When four months old it had bronchitis. The present sickness was noticed to begin five weeks before entering the hospital, and was marked by loss in weight and appetite, followed in a week by enlarged abdomen, vomiting and diarrhoea without much pain. Ten days before entrance the infant had convulsions which recurred six times in the following three days. The mother states that the baby had been living in a room with an aunt who was very sick with consumption.

A physical examination showed the infant to be emaciated, pale and looking sick. The mental condition was clear. There were a few slightly enlarged lymph nodes in the axillae and at the angles of the jaw. There was no oedema of the skin. The epiphyses were slightly enlarged and there was a slight rosary. There was no craniotabes. The fontanelle was of normal size, but a little depressed. The throat and mouth were normal. The cardiac area was normal and the sounds clear.

Percussion of the lungs showed nothing abnormal, except that there was dulness at both bases behind covering an area corresponding to about two ribs and presumably caused by abdominal pressure.

Auscultation of the lungs showed nothing abnormal.

There was nothing abnormal about the anus or genitals. The abdomen was distended and tense. The spleen on each inspiration could be felt just at the edge of the ribs. The palpation of the abdomen under ether

showed that the liver came down 6 c.m. below the border of the ribs in the right mammary line—The edge of the liver was thicker than normal, but the surface was smooth.—The abdomen was dull on percussion, but there was no fluctuation.

An indefinite elongated tumor about 6-7 c.m. long and 3-4 c.m. broad, and also felt by the finger in the rectum, could be detected on the left side of the abdomen.

An examination of the blood showed the leucocytes to be 8800.

The urine was normal in color; its specific gravity was 1012; a trace of albumin; its sediment was slight and contained numerous round cells, occasional hyaline and finely granular casts and an occasional cast with epithelial cells on it.

On entering the hospital the temperature was not elevated; later it was

moderately elevated and irregular in type.

The general condition became worse, the infant gradually grew weaker and died without any other change in the physical signs twelve days after entering the hospital.

- 2. State the causes of enlarged cervical lymph nodes in children.
- 3. What is the antitoxin of diphtheria and how is it administered?
- 4. How would you differentiate between a mild attack of small-pox and a severe attack of chicken-pox?
 - 5. The symptoms, prognosis, and treatment of cholera infantum.
 - 6. The diagnosis, prognosis, and treatment of tubercular peritonitis.

SURGERY. - Professor WARREN.

- 1. What are the causes and symptoms of erysipelas? Give the treatment and general management of the case.
- 2. What are the indications for treatment in fracture of the elbow joint?
- 3. Describe the two principal forms of dislocation of the hip. By what form of violence are they produced? Give the method of reduction in each case.
 - 4. Surgical phlebitis: its cause, prognosis, and treatment.
- 5. What is the prognosis of an injury by the modern army rifle projectile?
 - 6. The symptoms and treatment of intussusception.
 - 7. What are the sequelae of stricture of the urethra?
- 8. What are the principal symptoms which guide us in determining the locality of a tumor of the brain?
 - 9. The differential diagnosis of internal hemorrhoids. The treatment.
 - 10. The diagnosis of cancer of the breast.

OBSTETRICS. — Professor W. L. RICHARDSON.

- 1. How is the nutrition of the foetus maintained before the formation of the placenta?
 - 2. Causes and treatment of the severe vomiting of pregnancy?

- 3. What is the diagonal conjugate of the average, normal, female pelvis, and how is it measured? How do you compute the true conjugate from the diagonal conjugate?
- 4. What symptoms would lead you to suspect the death of the foetus in utero? What results may follow? Treatment?
- 5. Describe the management of the O.D.P. position, the diagnosis having been made early in labor from abdominal palpation.
- 6. Describe the normal mechanism of labor in M.D.P. What failure in the normal mechanism makes interference necessary?
 - 7. Treatment of a funis presentation?
 - 8. Prophylaxis and treatment of post-partum haemorrhage?
- 9. A patient, 33 years old, at the end of the sixth month of her second pregnancy had, after slight exertion, considerable flowing lasting two days. She was kept in bed for a week. There was no pain nor dilation of the os. Two weeks later the patient again began flowing without any known exciting cause. After two days of absolute quiet in bed, labor began and, when seen by the attending physician, the pains were strong and regular at ten minute intervals. Examination showed a considerable loss of clotted blood; the os was the size of a quarter; the presenting part, probably a breech, could be made out only with difficulty; the membranes were ruptured; the tip of the placenta could be felt attached at the left side of the internal os. The foetal heart was strong and regular.

Describe your treatment of the case.

10. How does the pulse and temperature chart in puerperal septic infection differ from the chart of intercurrent tonsillitis in the puerperium?

GYNAECOLOGY. — Asst. Professor Davenport.

- 1. Describe the blood supply of the uterus.
- 2. How would you diagnose an anteflexion of the uterus, and what are the symptoms?
- 3. In a case of fibroma of the uterus what would be the indications for operative treatment?
- 4. Describe the operation of suspensio uteri.
- 5. What are the most common forms of cancer of the uterus, with special reference to their clinical manifestations?

DERMATOLOGY. — Professor White.

- 1. Affections of sebaceous glands.
- 2. Treatment of eczema.
- 3. Impetigo contagiosa.
- 4. Tuberculosis of skin.
- 5. Vegetable parasitic affections.

NEUROLOGY. - Professor Putnam.

(Give concise, explicit answers.)

- 1 What different sorts of affections are included under the term "neuritis"?
- 2. What are the causes of pain in the course and distribution of the sciatic nerve (a) of one side; (b) of both sides?
- 3. At what period of the year does chorea usually occur; at what period acute anterior poliomyelitis?
- 4. What form of spinal degeneration is associated with pernicious anaemia, and what are its symptoms?
- 5. What are the causes of paralysis of the ocular muscles, one or all?
- 6. Mention any original observations that you have made in the course of the year.

PSYCHIATRY. — Dr. Cowles.

- 1. What is the constant fact in all cases of "imperative ideas", with respect to the reactions between the attention-object, the emotions and the will?
- 2. In what ways is the emotional tone affected by changes in the organic sensations?
- 3. Describe briefly the relations to each other of melancholia and mania and their differential characteristics.
- 4. Case. A young woman. Single. Age 20 years on admission to Hospital in 1899. Heredity good; always healthy; bright and amiable; college education; employed as book-keeper. Began sleeping poorly 3 months before admission; became "listless", physician advised stopping work which was still satisfactory. At home depressed, had crying spells; after a week returned to work and did it well, but depression continued and she gave it up. For two months at home, inactive, occasionally crying and wishing she was dead; sometimes smiling in silly manner. Three weeks before admission went to seashore; a week later wrote that her name was to be erased from the church roll, but she meant to live a better life. Soon after she said her father was to be electrocuted; again, that he had been killed and the funeral was going on; then seeing him was not surprised; said the other girls were talking about her and accusing her of stealing. Inactivity and apprehension continued, feared something was going to happen, — family to be killed, etc.; but appeared well before strangers.

In Hospital. — Physical examination negative. Habitually constipated; tendency to loss of weight. For 2 days restless, asking, "Is my father alive?". Regretted a letter she had written as it would cause his death; then became reticent; at breakfast upset the dishes, etc., and could give no reason. Would answer but few questions and being asked many times why she did not, finally said: "My father's sins!". At first at an examination showed no resistance to passive motions, — arm raised remained in position 45 seconds; then intense resistance upon any attempt to move her limbs. Later, suddenly assuming sitting posture sprang at the physician several times with fierce expression, but remained mute. Explained

later by saying: "I was excited; I was influenced wrong someway!". Continued reticent, but would suddenly spring out of bed and do foolish acts; face expressionless, but she sometimes laughed in a silly manner. She was oriented, — could answer questions and wrote letters showing good memory and comprehension, — but later would repeatedly ask the same question and thought that something had happened to her family. Two months after entering hospital became more and more apathetic, — appeared unconcerned and childish; lying on the bed; required help in dressing and frequently resisted it; more difficult to get answers or to attract her attention, but she would suddenly utter a few words, laugh, make peculiar motions, or throw something from the window. When crying or laughing her face had blank expression.

Diagnosis? Prognosis? Treatment?

5. Describe Involution Psychosis.

Fourth Year Studies.

CLINICAL MEDICINE. — Professor SHATTUCK.

[Discuss these cases in the order in which they are arranged. Assume that symptoms not mentioned are wanting; but as omissions, intentional or not, may occur, state them if essential. The intelligent discussion of the case will have more weight than a hasty and inconclusive, though correct, diagnosis. Write out all prescriptions in full.]

Case 1.—A young man of 21 is seen in consultation January 10. At the age of 12 he had very severe scarlet fever, followed by endocarditis for the results of which he was under medical care for about three years. Of recent years his health has been very good and he has ridden the wheel fast and far without inconvenience. Rather more than two months ago he went to the doctor's office for a "cold" - temperature normal. A few days later he returned with a temperature of 103°, and said he had had night sweats. He was sent home, sat about the house for two days, and then took to his bed which he has not left since. A four hourly chart has been kept for sixty-two days and shows a continuous fever ranging from 101 to 104, usually higher in the afternoon. On the seventh and tenth days after taking to his bed he had nose-bleed. This he had occasionally when well. Cough has been a fairly constant though not prominent symptom and twice has led to vomiting. The bowels have been regular with the aid of an occasional enema. Delirium has been practically absent. Early in his illness there were a few doubtful rose-spots. The spleen has never been palpable. He has once or twice complained of some pain in his shoulders, but has had no other articular symptoms.

The pulse was about 90 at first, regular, of good strength. It has lately become irregular and rapid, some of the heart beats not reaching the wrist. Under digitalis, brandy and strychnia the pulse has improved very much and is now regular, 100. Ever since he took to his bed he has been under an exclusive milk diet. The urine is sufficient in quantity with a good trace of albumin, granular and hyaline casts, sp. gr. 1015.

The patient is pale, lies on his back, has a clear tongue, complains

only of weakness.

On physical examination the lungs seem clear. The heart's impulse is in the fifth space, half an inch to the left of the nipple. A systolic murmur is heard at a maximum intensity over the impulse, transmitted

into the axilla. Inside the left nipple is a doubtful presystolic murmur. The pulmonic second sound is accentuated, with second sound clear. The belly is slightly distended, duller at the flanks than in the centre, the dullness and resonance shifting somewhat with change of position. The blood shows a moderate leucocytosis and no Widal reaction.

Diagnosis? Prognosis? Treatment?

Case 2.—A clerk, married, 24, is seen in consultation the afternoon of January 5. His family and previous history and habits were good. He went to bed the night of the 3d in his usual health and slept well. On rising in the morning he had a severe chill, but went to business. After an hour or two he was obliged to return home, feeling very weak and aching all over. He took to his bed, raised some bloody sputum, had some nose-bleed, and passed urine freely without pain, containing much fresh blood.

When seen he did not look very ill, pulse 100, resp. 24, temp. 103.6. He complained of no pain. Physical examination was negative, except for slight dulness with feeble respiration and crepitus over the left posterior base of the chest.

There were several discrete, viscid, bloody sputa in a cup. The urine

was smoky, 1014, with a very large trace of albumin; urea 1.64%.

The sediment contained considerable normal and abnormal blood; rather numerous epithelial casts of large diameter; one disintegrated blood cast; one or two large fine granular casts. Leucocytosis present.

Diagnosis? Prognosis? Treatment?

Case 3.—A girl of 19 is seen May 26. Her maternal grandfather died of phthisis. Family history otherwise good. She has always been rather pale and delicate, but had no definite or serious illness. Toward the end of February she consulted her physician for slight swelling of the glands on the left side of the neck. The temperature was slightly elevated when taken after this, and during the next two weeks the glands increased considerably in size and she had some cough, apparently due to bronchitis. Toward the end of March she began to improve and the glandular swelling to subside. The appetite increased and she got out. Two weeks ago she was less well; fever returned to a moderate degree, as did cough, and slight crepitus was heard under both clavicles. One week ago, the day being mild, she sat on the door-steps and experienced a sudden pain at the root of the nose, just between the eyes. This pain extended over the forehead, increased in intensity and is more relieved by cold than by hot applications. Four days ago without obvious cause she vomited once. The next day she vomited again and the headache became intense. For the past 48 hours she has retained nothing on her stomach. To-day there was slight hiccough after vomiting and the menses appeared, the first time for three months. Morphia by the mouth gave her no relief. In the last twelve hours she has had three suppositories containing a quarter of a grain of morphia each with only partial relief to her headache. Before the morphia was begun the pupils were large, equal and reacted equally to light. Her aunt states that the pupils have always been large. They are now moderately contracted, equal and respondent. Photophobia. pulse has ranged 90-100. Temperature 99° this morning, 100 last night.

The pulse is now 60-100, changing its rate quickly and frequently. Respiration easy. The mind seems clear, but she is very disinclined to

talk or make any effort.

The glands in the right side of the neck are slightly enlarged. The heart is negative. No râles are detected over the fronts. The backs are not examined as it does not seem wise to disturb her to that extent. Abdominal examination gives negative results. The reflexes, superficial and deep, are not obtained. Urine negative. Neither the sputum nor the blood have been examined. There is no paralysis.

Diagnosis? Prognosis? Treatment?

CLINICAL SURGERY. - Professor C. B. PORTER.

Case 1. — The patient, a male aged 40, after exposure to cold and wet, had pains in his knees, but no swelling. A month later swelling commenced in the left knee and then in the right, and subsequently in the right arm, elbow, and wrist. The swelling was attended by considerable sweating. His condition improved slightly in a few weeks, but soon his knees began to swell again, and the soreness increased so greatly that he was forced to stop work and take to his bed. There he lay for a number of weeks with pain so violent that he could only get snatches of sleep, and during that time he lost 35 pounds in weight. After three weeks of suffering he entered a hospital with both knees considerably swollen, the patella floated and there was a creaking on movement. Tonic treatment and rest brought considerable relief, and he was discharged with the advice to bathe the knees in hot water and keep them bandaged. This was done for some months, but he has not been able to reduce the swelling. In the morning his knees are usually so stiff that he cannot put on his trousers and shoes until he has taken an hour for limbering up. His chief complaint is weakness in his knees. He cannot rely on them. The knees are swollen; there is crepitation when the knees are flexed, but he states that he suffers no pain except before a storm. His appetite is good; he feels comfortable and well. His great desire is to get his knee strong so that he can resume work.

Physical examination reveals a strongly built man, well-nourished and with nothing apparently abnormal except swollen knees. The swelling forms a puff on either side of the quadriceps tendon on either side of the patella. When the knees are flexed there is a marked bulging below and on either side of the patella. This was more marked on the left knee. Pressure on the lower border of the patella when the knee was flexed caused some pain. The presence of fluid in the joint is shown by the knocking of the patella against the femur when the leg is extended and the patella pushed sharply down, and also by the fluctuation of the swelling; that is, the increase of the swelling on one side when the other side is pressed. There is a soft crepitation, like the rubbing of two dry fingers together. When the knees are flexed the left knee shows this condition more clearly than the right. The tissues about the joint seem rather soft and sodden.

What is your diagnosis?

What treatment would you recommend?

What is the prognosis?

Case 2. — Patient a small, slightly built woman in fairly good flesh. Previous history unimportant. She is 39 years of age, married. Her present trouble began a year ago, when she would have once in three or four weeks sharp pains in the right hypochondrium, extending to the pit

of the stomach on the left and the angle of the scapula above. About seven months ago the pains grew more severe and were felt nearly every day, accompanied with nausea, but without vomiting, and a dragging sensation in the right side. She says she has been subject to indigestion and cramp in the pit of her stomach, also to many neuralgic pains, particularly in the region of her backbone and base of skull, accompanied by blinding headaches. Her bowels she said would immediately become constipated if she was not influenced by the constant use of cathartics. She describes her urine as having been at times small in amount and of a muddy, brownish color, but since her entrance to the hospital it has reassumed more normal conditions. It was shown by the hospital chart that she had a temperature ranging between 98.5 and 100. On inspection the patient is not markedly emaciated, although thin. There is no perceptible swelling in the neck; chest walls give good resonance; the abdomen well formed and proportioned. The walls of the abdomen were lax in the recumbent position and not unduly tympanitic, although the patient says she has been somewhat swollen in that region. On palpation there is found in the right lumbo-hypochondriac region a well-defined rounded mass which is clearly movable independently of the abdominal walls. It descends in a moderate degree on inspiration. The area of the hepatic dullness was not increased. No splenic enlargement could be felt, and the area of gastric tympany did not seem to exceed its normal limits. Aside from the pain above referred to, the act of palpation gives the patient much discomfort, producing marked nausea, although she says that it has never produced actual vomiting. The tenderness with the accompanying nausea is more marked when pressure is made with the fingers from above downward, rather than from below up. The examination of the urine: Sp. gr. 1015; color normal; no albumin; no bile pigment; no sugar.

What is the probable diagnosis?

What the treatment?

What the prognosis?

Case 3.— Patient, a woman 54 years of age, mother of ten children, menopause six years ago. Has always been well until three years ago, when she had an attack with severe pains at the pit of the stomach and extending to the right shoulder and back. There was nausea and vomiting. The pain was so severe that it required subcutaneous injections of morphia to relieve it. Did not have another attack for a year when she had a severe one. The past year they have occurred about every month, with slight jaundice with each sickness. She is a well developed woman, rather anaemic, and flesh is flabby. Her pupils react well to the light; tongue slightly coated, chest large, and good resonance throughout both lungs. Heart regular in rate and force, sounds rather weak. Abdomen negative; no tenderness, no tumor. Urine normal in color, acid, specific gravity 1020, albumin and sugar absent.

What is the probable diagnosis?

What the treatment?

What the possible complications without treatment?

ORTHOPEDIC SURGERY. — Asst. Professor Bradford.

- 1. How is hip disease to be recognized?
- 2. How is caries of the spine to be recognized?
- 3. How is tubercular disease of the knee joint to be recognized?
- 4. How is tubercular disease of the ankle to be recognized?
- 5. Describe the condition known as club-foot,—the important anatomical relation, and give the principles of treatment.
- 6. What are the causes of the curves in rickets?
- 7. What are the most important curves in rickets?
- 8. What is meant by weak foot, and what is meant by flat foot?
- 9. What are the principles of treatment of hip disease?
- 10. What are the principles of treatment of caries of the spine?

SYPHILIS. - Dr. Post.

- 1. Describe the clinical condition of the lymphatic glands in syphilis.
- 2. What are the general differences between the early and late syphilides?
- 3. What do you understand by mixed treatment? In what class of cases is it specially useful?
- 4. What do you understand by parasyphilitic affections?
- 5. A healthy woman becomes inoculated with syphilis in the fourth month of pregnancy. What will be the effect upon the child?

OPHTHALMOLOGY. — Professor Wadsworth.

Answer five questions.

- 1. a) Describe briefly the ciliary muscle.
 - b) Its innervation and its action.
- 2. Hordeolum and chalazion. Differential diagnosis.
- 3. Ulcer of the cornea. Diagnosis and treatment.
- 4. The differential diagnosis between strabismus and paralysis.
- 5. Trachoma. Diagnosis, complications, and treatment.
- 6. Symptoms and treatment of iritis? of glaucoma?

OTOLOGY. - Professors Blake and J. O. Green.

- 1. Describe the surgical landmarks on the external surface of the temporal bone and locate the point for opening the mastoid.
- 2. Is it possible to drain fluid from the middle ear through the Eustachian tube with the head in the ordinary position?
- 3. In what directions does the malleus move when the tensor tympani muscle contracts?

- 4. What is the function of the terminal nerve apparatus of the semi-circular canals?
 - 5. Give the pathology of chronic suppuration of the tympanum.
 - 6. Give the indications for a tympano-mastoid exenteration.
- 7. A boy, five years of age, has put a boot button into his ear; it is lodged in the canal, at the junction of the cartilaginous and osseous portions, with the rounded side presenting; the parents are much concerned, but the boy is suffering no discomfort. What advice would you give the family and what would be your treatment?
- 8. What is the prognosis, as to hearing, in a case of otitis media suppurativa acuta, without complications?

LARYNGOLOGY. — Dr. Coolidge.

- 1. Describe deviations and spurs of the nasal septum.
- 2. Etiology, diagnosis and treatment of nasal polypus.
- 3. The differential diagnosis of acute tonsillitis and peritonsillar abscess.
- 4. Diphtheritic paralysis of the fauces.
- 5. Draw and describe the normal larynx as seen in the laryngoscopic mirror.
- 6. Describe and give the treatment of papilloma of the larynx.

LEGAL MEDICINE. — Professor Draper.

- 1. What is the usual cause of death in fatal cases of "criminal abortion"?
- 2. Describe your method of removing, examining and preserving the stomach at the autopsy of a person supposed to have been murdered by poisoning.
- 3. A dead human body, without signs of decomposition, is found floating in the water; what are the appearances which would determine that the cause of the death was submersion?
 - 4. What are the symptoms caused by acute starvation?
- 5. Under the rules of law, to what extent, if any, are scientific books permitted in the examination or cross-examination of a medical witness? What precautions should the witness take under these conditions?
- 6. Give the differential diagnosis of idiopathic catarrhal vulvitis and traumatic vulvitis (rape) in a girl of ten years.

HYGIENE. -- Asst. Professor Harrington.

- 1. Composition of normal air. What amount of carbon dioxide in parts per 10,000 may be regarded as compatible with efficient ventilation of inhabited rooms? How much air per capita is needed per hour for the proper dilution of the impurities given off by the body?
- 2. Significance of nitrites in drinking-water. What is meant by "temporary hardness"? In what respects are tube wells preferable to dug wells?

- 3. Soil moisture and malarial disease; point out wherein the supposed causal relation is explainable by the theory of transmission by mosquitoes.
- 4. Compare the nutritive properties of cereals and leguminous seeds. To what are the relapses sometimes observed in meat poisoning supposably due?
- 5. Name the chief disadvantages of chemical precipitation and bacterial treatment of sewage.
- 6. How is death-rate calculated? What is meant by "zymotic death-rate?"

Electives.

ANATOMY — Professor Dwight.

[Answer only two of the following questions.]

Describe the structures and their relations seen in a dissection of: -

- 1. External rectus muscle of the eve.
- 2. Phrenic nerve.
- 3. Common and superficial femoral arteries.

EMBRYOLOGY. — Professor MINOT.

- 1. What is the section from? What tissues does it contain? [Section of human decidua reflexa.]
- 2. Sketch a section and name its principal parts. What is the stage of the blood?

[Section of a chick embryo with eight primitive segments.]

3. Sketch and name the parts of the urogenital system shown in the section.

[Section through the abdominal region of a chick embryo of eight days.]

4. How is the lens developed?

STRUCTURE OF THE NERVOUS SYSTEM.—Professor MINOT.

1. At what level is the section taken? Draw the collaterals entering the gray matter.

[Section of the human cervical cord stained with copper haematoxyline.]

- 2. What is the difference between the anterior and posterior fissures of the spinal cord.
- 3. Draw the anterior and posterior nerve roots and the Anlage of the sympathetic.

[Section of a four days' chick embryo.]

- 4. What is the section? What are the principal accumulations of nerve cells in the section? Does the section show the pyramidal tracts? Where? [Section of the human medulla oblongata through the olivary body.]
 - 5. Describe a neuroblast.

6. What is the section? How cut? Give your reasons for the identification.

[Sagittal section of the cerebellum of the rabbit stained by the Cox-Golgi method.]

BACTERIOLOGY. - Professor Ernst.

How would you procede to make the bacteriological diagnosis in:—

- 1. Widal's reaction for typhoid fever?
- 2. Gonorrhoea?
- 3. Glanders?

PHYSIOLOGICAL CHEMISTRY. — Asst. Professor Pfaff.

- 1 How would you differentiate between the normal contents of the small intestines and those of the large intestines?
- 2. What precautions must be taken in the quantitative analysis of fat in muscle tissue?
- 3. What are the main products in urine and where do they come from?

COMPARATIVE ETHOLOGY OF INFECTIOUS DISEASES. Professor Smith.

[Answer three questions only.]

- 1. Discuss the significance and limitations of the term cause as applied to pathogenic micro-organisms and give illustrations.
- 2. Describe the defensive mechanism of antitoxin formation and give illustrations of its action towards bacterial toxins and various animal and vegetable poisons.
- 3. Discuss the relation between variola and vaccinia and give reasons for regarding these affections as mutually immunizing.
- 4. Give the salient characters of the morphologically undefined virus of rabies, rinderpest, and foot- and mouth- disease.
- 5. Describe the natural defences of the body against pathogenic microorganisms.

CLINICAL MICROSCOPY. -- Dr. WHITNEY.

- 1. The differential diagnosis between a papillary fibroma of the breast and an adeno-carcinoma both to the eye and microscopically.
- 2. The characteristics of a fluid from a cystoadenoma of the ovary.
- 3. The characteristics of a malignant deciduoma (syncytial cancer) of the uterus.
- 4. Description and diagnosis of a fresh specimen.

OPERATIVE SURGERY. — Professor C. B. PORTER.

- 1. Give the rules for the ligature of the subclavian at point of election.
- 2. Ligature of the brachial at middle of arm.
- 3. Ligature of femoral at apex of Scarpa's triangle.
- 4. Ligature of ulnar high.
- 5. Ligature of dorsalis pedis.
- 6. Amputation of thigh by circular method.
- 7. Amputation of fore-arm by cuff method.
- 8. Describe operation of castration.
- 9. Describe operation of circumscision.
- 10. Describe operation of excision of knee-joint.

ORTHOPEDIC SURGERY. — Asst. Professor Bradford.

- 1. Describe the anatomical origin and course of development of a psoas abscess. Give the course of treatment advisable in the different stages of development and the indication for treatment.
- 2. Describe the method of operation in sterno-cleido-mastoid torticollis. Give the treatment immediately after operation, and describe in detail the apparatus to be worn subsequently, and state how long.
- 3. Describe in detail the mechanical treatment advisable in the different stages of hip disease.
- 4. Give the diagnosis, prognosis, and treatment in detail to be advised in the following case:—

A young man, aged 18, who, when five years of age, suffered from hip disease recovered after 5 years, leaving his limb distorted.

On examination at 18 years of age the thigh is found flexed and fixed firmly at 90°; there is no motion at the hip joint, there is slight adduction. The trochanter is 2 inches above Nelaton's line. Several scars are seen around the trochanter of healed sinuses, the last sinus having healed 3 years ago.

There is no pain, tenderness or swelling, but marked distortion on walking.

5. Give the diagnosis, prognosis, and treatment in the following case, describing mechanical treatment in detail:—

A child, aged 4, lost the power of walking; this developed gradually. No sensory paralysis; attacks of pain in the side and stomach; child inclined to lie down; is easily tired, restless, and fretful; there is little or no fever. The child thought by the family physician to have "painful indigestion" and to suffer from "asthmatic bronchitis." The 6th and 7th cervical vertebrae are more prominent than usual, and this is perhaps more apparent as the back seems more flat than normal; the lower part of the back is flexible, but the head is held stiffly. Knee and ankle reflexes exaggerated. Sleep irregular, and has lost flesh.

OPERATIVE OBSTETRICS. - Asst. Professor C. M. Green.

- 1. The first pregnancy of a young woman was complicated with a small uterine fibro-myoma. She was delivered at term of a stillborn child; there was moderate post-partum haemorrhage, and several secondary haemorrhages occurred, so that the convalescence was somewhat protracted. In the latter months of the second pregnancy, a fibroid as large as a cocoa nut was found to occupy the right cornu of the uterus; and the foetal position was transverse. At the first visit by the attending physician after the advent of labor, the os uteri was found fully dilatable, the membranes unruptured, and the vaginal examination revealed only the foetal ribs within reach of the fingers. The foetal head was in the right of the uterus, below the fibroid tumor. The mother's condition was excellent, and the foetal heart sounds normal. Describe concisely your treatment of this case as far as the third stage.
- 2. In the above case, after the spontaneous expulsion of the placenta, there was a considerable haemorrhage from the uterus. Supposing friction, ice, intra-uterine injections of hot water, and ergot to have failed to arrest the haemorrage, how would you further treat the case? Describe concisely any procedures you may employ.
- 3. A multipara, seen early in the first stage of full-term labor, presents the head, O. D. P., resting on the brim, but not engaged; the membranes are unruptured. Four hours later the os is found to be fully dilatable, and membranes intact. Expulsive pains have just begun. The foetal position is still O. D. P.; the biparietal diameter is above the brim, and the head is somewhat extended. Outline your management of the case from this time up to the third stage.
- 4. Suppose that in the case cited in question 3 you were not allowed to carry out your proposed treatment, and that you retired from the case on the arrival of another attendant. Called to the case in consultation eight hours later, you find the membranes long since ruptured, the uterus retracted, the foetal position O. D. P., the head engaged, and the brow presenting. The mother's condition indicates speedy delivery; the foetal heart sounds have been inaudible for two hours. Describe the operation by which you would deliver.

GYNAECOLOGY. — Asst. Professor C. M. Green.

[As far as possible, illustrate your work with diagrams.]

- 1. Give the technique of ventro-suspension of the uterus, and state the conditions under which this would be the operation of election in retrodisplacements.
- 2. What are the indications for hysterectomy in the presence of fibromyomatous tumors? Give the technique of supra-vaginal hysterectomy.
- 3. State concisely the non-operative treatment of chronic salpingitis and peri-salpingitis due to septic infection. Under what conditions is surgical treatment advisable in these cases?

- 4. Describe the surgical treatment and after care of dysmenorrhoea due to acute anteflexion of the cervix uteri.
- 5. What are the indications for trachelorraphy in cases of cervical laceration? How should the cervix be prepared for operation? Give the technique of the operation, and after care.

DERMATOLOGY. - Dr. Bowen.

It is to be assumed that any symptoms, appearances, or other facts connected with the case that are not mentioned, are wanting. The differential diagnosis, prognosis and treatment are required in all the cases, and an intelligent discussion will count more than a correct diagnosis. Prescriptions should be written out in full.

Case 1.—A well nourished woman of 51, married, two healthy children. Family history and personal history good. The present lesion made its appearance three years ago, and according to the patient's account was about as large at the outset as now. She presents on the left ala of the nose an ulcerated lesion of an irregularly rounded contour, of the diameter of a cent, on the average. The loss of substance is moderately deep, but has not yet involved the cartilage. The tissue beneath the ulcer is not infiltrated. The floor of the ulcer is covered with brownish crusts pretty firmly adherent and there is little exudation to be seen. In some places there are signs of cicatricial tissue between the crusts. The edges of the lesion are prominently raised and in some parts made up of roundish nodules. The edges are very hard to the touch, and when the skin is put upon the stretch they have a whitish, glistening appearance. There is no pain. There are no other lesions upon the skin or upon the mucous membrane.

Case 2.— A man of 37, born in New Brunswick. No previous illness of importance. Denies venereal disease. Smokes to excess; is a very moderate drinker. A year ago first noticed a small circular area on the left side of his chin, where the hairs had disappeared in great part. This was at first the size of a small pea, but in a short time increased in area, and two weeks later was followed by two similar patches, one in a corresponding situation on the right side of the chin, and the other just below and in front of the angle of the jaw on the left side. All of these patches have increased in size by spreading peripherally.

Six months ago two similar areas appeared on the scalp, which have increased in size until they are each about the size of a silver half dollar. One of them is situated on the left side, about half way from the ear to the crown of the head; the other is upon the occiput. These areas upon the scalp are pretty well covered with a fine growth of lanugo hair, lighter in color than the normal hair. There are no long hairs present in the patches. These patches are circular in outline, sharply defined, and the

surface of the skin is smooth and not scaling, nor reddened.

Of the patches on the bearded face the spot that appeared first has attained the size of a silver dollar, while the other two are about the size of a half dollar. They are circular in outline, and, as in the case of the patches upon the scalp, the skin shows no redness, scaling or infiltration. These areas upon the beard are absolutely devoid of hair. There has been no treatment.

Case 3.—A boy, 7 years of age, is brought to the clinic by his mother. Parent and child uncleanly and neglected in appearance. The boy is fairly well nourished, and has had only measles and varicella, so far as can be learned. The affection began two weeks ago with a lesion, similar when first noticed to the crusted lesions now seen, although smaller, and situated at the corner of the mouth. Other similar lesions have appeared since then until now the following picture is presented: - At the angles of the mouth, on the cheek adjacent to the ear of the right side, and on the chin, are seen superficial crusts, of a vellowish color, sharply bounded from the normal skin, and without infiltration of the base. Their contour is irregular. Upon lifting up the crusts, a red, oozing surface is exposed. The lesions at the angles of the mouth are roughly inch in diameter, while the patch upon the cheek adjacent to the ear measures one inch horizontally. Besides these purely crusted patches, there are scattered over the face a half dozen small vesicular lesions, varying in size from a pin's head to that of a pea, with a red areola, in some of which the vesicle may be seen to be rapidly breaking down, with the beginning of a crust similar to that seen in the larger lesions. Upon the hands and forearms are several patches of superficial crusts, similar to those seen at the angles of the mouth and near the ear, some of which have been partly removed by scratching, leaving a moist exuding surface. There are also small superficial excoriations on the arms and legs, evidently the result of scratching. The other parts of the skin are not affected, and there has been no rise of temperature, nor constitutional disturbance. Upon inquiry it is found that another younger child has upon the face what seems to the mother a similar affection.

Case 4.—A man of 25, unmarried, generally healthy, occupation day laborer, comes to the hospital for relief from an eruption of the skin, attended by severe itching. He states that it has been present for six months, during which time he has had treatment from two different physicians, who have given him various ointments and washes, some of which have relieved the affection temporarily. The chest, back and folds of the axillae are covered with a small papular eruption together with excoriations. The tops of many of the papules are excoriated and covered with a small adherent crust. The arms and hands are almost completely free. There are no lesions on the abdomen. On the penis are three or four elevated, slightly elongated papules; the fronts of the thighs and the buttocks are covered with a small papular eruption similar to that upon the chest. The papules are very small and without infiltration so that they are barely perceptible to the touch. The itching is most marked when the patient is in bed. No other member of the family is affected.

Case 5.—A woman of 28, previously healthy, and who has had no other skin affection, five days ago noticed several scaling spots on the chest and abdomen, which have increased rapidly in numbers, until now they are pretty well scattered over the trunk, with some lesions of the thighs. There are a few lesions on the upper arms; none upon the head. The affection is absolutely dry and scaling. There is no evidence anywhere of exudation.

The lesions consist of small papules, very slightly elevated, from the size of a pin's head to that of a pea, covered with very fine branny scales, and larger macular lesions slightly scaling which have an oval and circinate form. On the thorax these oval lesions have their long diameter parallel to the lines of cleavage of the skin. The oval and circinate

macular lesions vary in diameter from a quarter of an inch to an inch. On the thorax there is one oval lesion nearly 13 inches in its long diameter, which was the first to be noted. The centre of these circinate and oval macular areas has cleared somewhat and is of a very pale yellowish tint, while the branny scales are more apparent at the edges. The edges are pretty sharply bounded and not serrated. There is very little itching.

NEUROLOGY. — Dr. WALTON.

[Answer six questions.]

- 1. Mention the different ways in which syphilis may affect the nervous system. Signs and symptoms, especially in early stages.
- 2. Under what circumstances are ocular muscles paralyzed?
 - 3. Causes of hemianopsia, temporary and permanent.
 - 4. Stigmata of degeneracy.
 - 5. Describe Jacksonian epilepsy, and mention its causes.
 - 6. Physical signs of neurasthenia and hysteria.
- 7. Character of anaesthesia in syringomyelia, in tabes, in trauma affecting the spinal cord.
- 8. What alterations in the reflexes would you expect to find in the different stages of hemiplegia resulting from hemorrhage into the internal capsule?

OPHTHALMOLOGY. — Professor Wadsworth.

- 1. Describe the anterior chamber.
- 2. Diagnosis and treatment of ophthalmia neonatorum.
- 3. Differential diagnosis between iritis and glaucoma.
- 4. What classes of injuries are most likely to excite sympathetic ophthalmia?
 - 5. Define presbyopia, hypermetropia, myopia.
 - 6. What ocular symptoms are frequently found in locomotor ataxia?
- 7. A man is struck on the eye by a stick of wood. There is considerable pain for a few hours. On subsidence of the pain the sight is found to be greatly impaired and remains so. Seen a week later, the pupil is larger than in the other eye and reacts imperfectly. Vision is much improved by a strong convex glass. With the ophthalmoscope the fundus appears normal, but when the eye is turned downward a grayish body, with well-defined convex upper border, is seen behind the lower part of the pupil. Diagnosis, prognosis, and treatment.

OTOLOGY. - Professors Blake and J. O. GREEN.

- 1. Give the anatomical structures bounding the mastoid process.
- 2. By what ligaments and muscular attachments is the malleus held in place?
- 3. Describe the anatomical features that present themselves in a macerated temporal bone on which a tympano-mastoid exenteration has been performed.
- 4. What structures may be injured in performing paracentesis of the membrana tympani?
- 5. Indications which would lead you to perform a tympano-mastoid exenteration rather than the simpler antrum operation?
 - 6. Method of performing paracentesis of the drum-membrane.
- 7. How would you best remove a bean from the outer portion of the external auditory canal?
- 8. Appearances of the drum in acute serous accumulation in the middle ear hydrops ex vacuo.

THE MEDICAL SCHOOL.

STUDENTS.

Courses for Graduates.

1899-1900.*

Bridgham, Samuel Crosby, M.D. (Med. School of	
Maine) 1882,	So. Braintree.
Bridgman, Burt Nichols, B.S. (Amherst Coll.)	
1885, M.D. (Univ. Med. College, N. Y.) 1889,	Jamaica Plain.
Buttler, Charles Voorhees, M.D. (Univ. of New	
York) 1893,	Worcester.
Colburn, Frederick Wilkinson, Ph.B. (Brown	
Univ.) 1894, M.D. (Boston Univ.) 1897,	Holliston.
Curran, George Robert, B.S. (Carleton Coll.) 1887,	
M.D. (Univ. of Michigan) 1892.	Worthington, Minn
Dodge, Fred Wilder, M.D. (Boston Univ.) 1891,	Norwood.
Fallon, Michael Francis, A.B. (Holy Cross Coll.)	
1884, м.р. 1887,	Worcester.
Geier, Otto Philip, M.D. (Med. College of Ohio)	
1897,	Cincinnati, O.
Hay, Joseph Smyser, M.D. (Univ. of the South)	,
1899,	York, Pa.
Hudnut, Frank Parker, M.D. (Bellevue Hospital	
Med. Coll.) 1883,	Brookline.
Hunt, Albert Frost, M.D. (Med. School of Maine)	
1889,	Portland. Me.
Jenkins, Charles Edwin, M.D. (Dartmouth Med.	
School) 1880,	Lynu.
Johnson, Elmon Reuben, M.D. (Boston Univ.)	
1895,	Wollaston.
Kennedy, Frederick William, M.D. 1882,	Lawrence.
Kessler, John Blair, M.D. (Bellevue Hospital Med.	

^{*} Entering after the issue of the Catalogue of 1899-1900.

Iowa City, Ia.

Coll.) 1883,

Keyes, Henry Sheridan, M.D. (Univ. of the South) Cambridge. Leavitt, Byron Charles, A.B. (Dartmouth Coll.) 1881, м.р. 1887. Denver, Colo. Lougee, Frank Taylor, M.D. (Dartmouth Med. School) 1886, Lynn. Lougee, William Wheeler, B.L. (Dartmouth Coll.) 1888, M.D. (New York Univ.) 1898, Malden. Lovett, Robert Williamson, A.B. 1881, M.D. 1885, Boston. Mitchell, Arthur, M.D. (Boston Univ.) 1886, Medfield. Painter, Charles Fairbank, A.B. (Johns Hopkins Univ.) 1891, M.D. 1895, Boston.

Pleadwell, Frank Lester, M.D. 1896,

Soule, Horace John, M.D. (Dartmouth Med. School) 1884,

Spaulding, Charles Lester, A.M. 1897, M.D. 1899.

Wellington, Claude Ryder, M.D. (Med. School of Maine) 1898,

Williams, Benjamin, M.D. (Med. School of Maine)

Worth, Edward Philip, PH.G. (Mass. Coll. of Pharmacy) 1895, M.D. 1899,

1900 - 1901.

Hitchcock, Henry Russell, A.M. (Brown Univ.) 1887, M.D. 1890,

Lazelle, Horace Gibbs, M.D. (Univ. Coll. of Medicine, Richmond), 1900,

McDonald, William Joseph, A.B. 1895, M.D. 1899, Macgowan, Joseph Johnston. M.D. (Memphis Hospital Med. Coll.) 1900,

Patton, Charles James, M.D. (Rush Med. Coll.) 1900, Plummer, Frank Wentworth, A.M. (Dartmouth

Coll.) 1894, M.D. 1895,

Sayles, Joseph Borland, M.D. (Dartmouth Coll.) 1887, M.D. (Bellevue Hospital Med. Coll.) 1888,

Shay, Thomas McGuire, A.B. (Boston Coll.) 1883, M.D. 1889, L.M. (Rotunda Hospital) 1889,

Soule, Horace John, M.D. (Dartmouth Coll.) 1884,

Stiles, Fred Merritt, M.D. (Med. School of Maine) 1890,

Vance, James, M.D. (Hospital Coll. of Med.) 1899, Walker, David Harold, M.D. 1 98,

Taunton.

Winthrop.

Boston.

Bangor, Me.

Rockland, Me.

Edgartown.

Hyde Park.

W. Somerville. Charlestown.

Roxbury.

Montreal, Can.

Malden.

Dighton.

Roxbury.

Winthrop.

Waltham. Louisville, Ky. Boston.

FOURTH CLASS.

Newtonville. Adams, Carl Schadiker, Newtonville. Alden, Eliot, A.B. 1897, Allen, Horatio Cushing, A.B. (Brown Univ.) 1897, Marion. Allison, Nathaniel. St. Louis, Mo. Barrett, Michael Francis, A.B. 1897, W. Hingham. Bartley, John Joseph, Lawrence. Binney, Horace, A.B. 1897, Middletown, Conn. Boos, William Frederick, A.B. 1894, PH.D. (Hei-Jamaica Plain. delberg) 1896, Bowman, Alfred Winthrop, Jamaica Plain. Brady, James Francis, Canning, N.S. Bragg, Leslie Raymond, s.B. (Amherst Coll.) 1897, Gloucester. Breed, Nathaniel Perkins, Salem. Breed, Nathaniel Pope, A.B. 1898, Lynn. Bremer, John Lewis, A.B. 1896, Boston.Brewer, Albert David, A.B. (lowa Coll.) 1895, Hyde Park. Brinckerhoff, Walter Remsen, s.B. 1897, Chicago, Ill. Burley, Benjamin Thomas, A.B. 1897, Cambridge. Burnham, Joseph Forrest, Lawrence. Caulfield, Thomas Edward, Woburn. Chase, Henry Melville, Jr., s.B. (Dartmouth Coll.) 1897, Lawrence. Cheever, David, A.B. 1897, Boston. Childs, Alfred Henry, A.B. 1897, Deerfield. Cholerton, Herbert, Bridgewater. Brookline. Clark, Franklin Edward, Taunton. Clark, Thomas Francis, Crane, Bayard Taylor, Melrose. Cummings, Morton Everett, W. Medford. Cunningham, John Henry, Jr., E. Wareham. Davison, Arthur Howard, Dorchester. Dutton, Richard, A.B. 1898, Wakefield. Dwinell, William Grout, Malden. Elmere, Johannes Alfred, A.B. (Angustana Coll.) 1890, M.D. (Kansas Med. Coll.), Boston. Emerson, Benjamin Kendall, Jr., A.B. (Amherst Coll.) 1897, Amherst. Evans, Albert, Laconia, N.H. Field, Martin Thomas, Beverly. Flagg, Elisha, A.B. 1887, Boston. Belmont. Gale, Harold Adams, A.B. 1898,

Gay, Herbert Seymour, Gibson, Robert Francis, Gleason, George Hathaway, Griffiths, Albert Farnsworth, Hapgood, Lyman Sawin, A.B. 1897, Haskell, Harris Bigelow, A.B. (Amherst Coll.) 1894. Hawkes, Charles Eleazer, A.B. 1898. Herbst, Philip Francis. Hess, Peter William, Holmes, Howard Fowler, s.B. 1898, Hoyt, Robert Eustis, Hutchinson, Walter Perkins, A.B. 1889, Jackson, Howard Bigelow, A.B., 1897, Johnson, Herbert, Jones, Francis Joseph, Jones, Harold Wellington, Kelley, Walter Henry, Kennedy, Arthur Lemuel, Knickerbocker, Percy Gates, Knight, Charles Lewis, Knight, Frank Henry, Kurth, Gustave Emil, Lambert, Fred De Forest. M.D. (Boston Univ.) 1900. Leary, Chrysostom John, Leen, Thomas Francis, A.B. 1898, Lewis, Frederic Thomas, A.B. 1897, A.M. 1898, Little, John Mason, Jr., A.B. 1897, Locke, Edwin Allen, Ph.B. (Brown Univ.) 1896, A.M. (ibid.) 1897, Lowell, William Holbrook, McBain, William Hearst, A.B. (Holy Cross Coll.) 1895, McDonald, Samuel James, A.B. 1897, Mahony, Francis Ronan, Mangan, John Joseph, A.B. (Holy Cross Coll.) 1883, A.M., (ibid.) 1896. M.D. (Coll. of P. and S., Boston), 1891, Mason, Nathaniel Robert, A.B. (Yale Univ.) 1897, Mooring, Scott Webber,

Morse, John Hinckley, A.B. (Bowdoin Coll.) 1897,

Moxom, Philip Wilfrid Travis,

Belchertown. Forest Hills. Dorchester. Lexington. Gloucester. W. Falmouth, Me. Portland, Me. Kansas City, Mo. Malden. Georgetown. Portsmouth, N. II. Abington. Concord. Waltham. Worcester. Cambridge. Dorchester. Denver, Colo. Gloversville, N. Y. Reach. Me. Malden. Boston. Salem. Waltham. Charlestown. Cambridge. Boston. Whitman. Newton.

Brighton. Roxbury.

Haverhill.

Lynn.
No. Conway. N.H.
Gloucester.
Bath, Me.
Springfield.

Mulherin, William Anthony, A.B. (St. Joseph's Coll.) 1891, A.M. (ibid.) 1900,

Murphy, Fred Towsley, A.B. (Yale Univ.) 1897,

Myer, James Walter,

Myers, Edward Everett,

Nolen, Walter Freeman,

Ober, Ralph Beverley,

O'Connell, Joseph Cyril,

O'Day, George Frederick, A.B. (Holy Cross Coll.) 1896,

Packard, Frederic Henry, A.B. 1898,

Parker, Harry Caldwell,

Pond, Bernard Wesley, A.B. (Yale Univ.) 1897,

Priest, Herbert Bancroft, A.B. 1897,

Putnam, Frank Wendell, s.B. (Tufts Coll.) 1897.

Putnam, Ralph, A.B. 1898.

Reed, William Edward,

Rees, Rees Bynon, M.D. (Univ. of Maryland) 1900,

Robertson, Frederick McNaughton,

Robinson, Harry Pringle,

Robinson, Louis Sydney Bassford, A.B. 1897,

Sanborn, George Phippen,

Sanders, Nathan Edwin, A.B. (Iowa Coll.) 1893.

Schallenbach, Ernest Bradford,

Sever, James Warren,

Shannon, James Herbert, A.B. 1897,

Shead, Edward Wadsworth,

Sise, Lincoln Fleetford, A.B. 1897,

Sleeper, Frank Warren, A.B. (Brown Univ.)

1895, A.M. (ibid.) 1896,

Smith, Appleton White, A.B. (Colby Univ.) 1887,

Smith, Harold Wellington,

Southard, Elmer Ernest, A.B. 1897,

Spalding, Roger, s.B. 1898,

Taminosian, Timotheus, M.D. (Jefferson Med.

Coll.) 1895.

Taylor, Frederick Leon, s.B. (Boston Univ.) 1890,

Tozier, Charles Herman, s.B. 1898,

Underhill, Samuel Graham, A.B. 1898,

Walker, Wallis Dunlap, A.B. 1897,

Webster, Fred Paterson,

Wight, Thomas Henry Toynbee,

Augusta, Ga.

Junction City, Kans.

New York, N. Y.

Boston.

Tacoma, Wash.

Chicopee.

Wakefield.

Worcester.

Watertown.

Dubuque, Ia.

Unionville, Conn.

Littleton.

W. Newton.

Chelsea.

Saxonville.

Columbus, O.

Waverley.

Plattsburgh, N.Y.

Chicago, Ill.

Brookline.

Grinnell, Ia.

Dorchester.

Cambridge.

Cambridge.

Eastport, Me.

Medford.

Franklin Falls, N.H.

Newton Centre.

Dorchester.

So. Boston.

Cambridge.

Boston.

Brookline.

Somerville.

Somerville.

Portsmouth, N. H.

Charlestown.

Cambridge, Eng.

Winslow, George Edgar, Wood, Nathaniel Knight, A.B. 1897, Wose, Alfred Millard,

Boston. Somerville. Syracuse, N.Y.

THIRD CLASS.

Adams, John Dresser, Allendorff, John Aloysius, Andrews, John Henry, A.B. (Boston Univ.) 1898, Bain, John Baxter, Baker, George Lorimer, Barnes, Allan Foster, A.B. 1898, Barrett, Joel Lewis, Barrows, Albert Armington, Ph.B. (Brown Univ.) 1898, Bartlett, Walter Oscar, Belding, John Eastman, PH.B. (Yale Univ.) 1895, Belknap, James Lyman, s.B. (Dartmouth Coll.) 1898. Bellamy, William Woolsey, Benner, Richard Stanwood, A.B. 1899, Bowditch, Henry Ingersoll, A.B. 1898, Bradley, Charles Henderson, Buckley, William Stephen, Bufford, John Henry, Buffum, William Henry, A.B. (Brown Univ.) 1898, Bulkeley, Frank Stedman, Burnham, Parker, Campbell, Franklin Edward, Chase, Arthur Alverdo, Clapp, Arthur Martin, A.B. (Amherst Coll.) 1898, Northampton. Closson, Leon Monroe, A.B. 1897, Cort, Parker Martin, Cragin, Donald Brett, Crocker, Louis Allen, PH.B. (Brown Univ.) 1898, Cutter, Arthur Hardy, s.B. (Mass. Agr. Coll.) 1894, Darling, Byron Clary, A.B. (Illinois Coll.) 1898, Dennen, Joseph Horace, M.D.v. 1898, Dennett, Roger Herbert, s.B. (St. Lawrence Univ.) 1898, DeNormandie, Robert Laurent, A.B. 1898, Donaldson, James Frank, A.B. (Tufts Coll.) 1898,

Dore, Francis James, A.B. (Boston Coll.) 1898,

Doray, Frank Leslie,

Brookline. Charlestown. Lynn. Lawrence. Boston. Cambridge. Woburn.

Providence, R.I. Natick. Springfield.

Andover. Dorchester. Waldoboro, Me. Albany, N. Y. Newton. Newburyport. Dorchester. Providence, R.I. Ayer. Gloucester. Manchester, N.H. Woburn. Lawrence. Utica, N. Y. Farmington, Me. Brewster. Pelham, N.H. Boston. Fepperell.

Waverley. Roxbury. Salem. Worcester. Roxbury.

Drake, Richard Alvin, W. Medford. Ellis, Robert Hale, Braintree. Emmons, Arthur Brewster, A.B. 1898, Boston. Evans, Miner Harlow Amos, Jr., So. Boston. Feiss, Henry Otto, A.B., 1898, Cleveland, O. Feldstein, Samuel, Uniontown, Pa. Ferguson, John Burnham, A.B. (Brown Univ.) 1898. Providence, R.I. Furrer, Arnold Frotcham, Boston. Gardner, Archibald Robert, Lowell. Garland, Frederick Eugene, A.B. 1898, Gardner. Gay, Fritz Walter, A.B. 1898, Malden. George, Frank William, Bristol, N.H. Glass, James, E. Boston. Goodall, Harry Winfred, A.B. (Dartmouth Coll.) 1898. Exeter, N.H. Goodridge, Frederick James, A.B. 1898, Cambridge. Goodwin, Charles Wilson, B.P. (Brown Univ.) 1897, Providence, R.I. Grady, Henry Matthew, So. Natick. Granger, Frank Butler, A.B. 1899, Randolph. Greenwood, Arthur Moses, A.B. (Brown Univ.) Ashburnham. Gushee, Edward Stockbridge, A.B. (Brown Univ.) 1898, Cambridge. Hamilton, Robert De Lancey, A.B. (Yale Univ.) 1897, Newburyport. Hammond, Roland, A.B. (Tufts Coll.) 1898, Boston. Hathaway, George Stimpson, Boston. Hearn, Walter Lawrence, Lynn. Heffernan, David Aloysius, Dorchester. Henderson, Lawrence Joseph, A.B. 1898, Salem. Hoag, Louis, Dorchester. Hodges, Stoughton Fletcher, Indianapolis, Ind. Hoey, Warren Henry, Milford. Hollister, Robert Russell, A.B. 1897, Fair Haven, Vt. Hooker, Stuart Van Rensselaer, A.B. (Rollins Coll.) 1893, Marshfield. Howard, Perez Briggs, Brookline. Hunt, Ernest Leroi, No. Abington. Irving, John James, Gloucester. Johnson, Erik St. John, A.B. 1898, Weymouth. Keene, Charles Herbert, A.B. 1898, Allston.

Kent, Bradford, Kilbourn, Arthur Goss, A.B. 1899, Knowles, Robert Keneborough Black, A.B. (Acadia Coll.) 1897, Lane, Arthur Kempton, Lang, Herbert Bowman, A.B. (Brown Univ.) 1896. Little, George Thomas, Lynch, Cornelius Joseph, A.B. (Holy Cross Coll.) 1898. MacCormick, John Allan, M'Coy, George Madison, Jr., MacLachlan, Robert Fulton, McPherson, Ross, A.B. 1898, Mills, Lloyd Hunter, Mitchell, John Joseph, Moore, George Colton, A.B. (Yale Univ.) 1898, Murphy, Arthur Sterling. Boston. Murphy, Patrick William, A.B. (Boston Coll.) 1898, Myers, Samuel William, Neilson, John Land, Nelligan, John Patrick, Nute, Albert James, Ph.G. (Univ. of Maine) 1897. s.в. 1899, O'Brien, Charles Thomas, A.B. (Boston Coll.) 1898, Palfrey, Francis Winslow, A.B. 1898. Porter, Robert Brastow, A.B. 1897, Prescott, Henry Dudley, A.B. 1898, Quinby, William Carter, A.B. 1899, Richmond, Ivus Irvin, Robbins, Michael Uriah, Roberts, William Frederick, A.B. 1898, Robinson, Samuel, A.B. 1898, Rollins, Edwin Theodore, Sennott, John Ralph, Sherman, William Anthony, A.B. 1899, Silva, Frank Rudolph, A.B. (Amherst Coll.) 1897. Small, Ernest Winfield, Smith, Forster Hanson, A.B. (Tufts Coll.) 1899. Snow, Frank Whipple, Somers, Pierce Edward, A.B. 1899,

Stearns, Robert Thomas, A.B. 1898,

Stratton, Ralph Ricker, A.B. (Boston Univ.) 1898,

Dorchester. So. Lancaster.

Liverpool, N.S. Boston. Cambridge. Groton.

Milford. Lake Ainslie. N.S. Boston. Roxbury. Cambridge. No. Haven, Me. Charlestown. E. Hartland. Conn.

Canton. Boston. Brookline. No. Cambridge.

Winthrop. Woburn. Belmont. Quincy. New Bedford. Worcester. Byron, Me. Newton. Roxbury.Boston. Newtonville. Cambridgeport. Newport, R.I. So. Dennis. Brockton. Lowell. Newburyport. Portland, Me. Jamaica Plain. E. Boston.

Stubbs, Richard Henry, A.B. (Bowdoin Coll.) 1898, Thomas, Raphael Clarke, A.B. 1896, Thompson, Charles Edward, Thompson, Frederick Henry, Jr., A.B. 1898, Thorndike, Townsend William, Tilley, Frank William, A.B. (Bucknell Univ.) 1898, Torbert, James Rockwell, Ph.B. (Yale Univ.) 1895, Tyzzer, Ernest Edward, B.P. (Brown Univ.) 1897, A.M. (ibid.) 1898, Vincent, Beth, A.B. 1898,

Walker, William Emrich, A.B. (Amherst Coll.)

Ward. Edward Silvanus, s.B. (Amhorst Goll.) 1898.

Waterman, John Slater, Wilson, Louis Thornton, s.B. 1899, Winchester, George Wesley, Wynne, Richard,

SECOND CLASS.

Adams, Zabdiel Boylston, Jr., Albee, Fred Houdlett, A.B. (Bowdoin Coll.) 1899, Allen, Howard Louis, Andrews, Robert Eaton, A.B. 1899, Ascher, Joseph, Ayres, Harold Winslow, Bail, John Warren, A.B. 1898, Bailey, Frederick James, Balboni, Gerardo Monari, Berry, Nathaniel Leander, Jr., Blair, Orrin Curtis, Boutwell, Horace Keith, Boyle, John Francis, Bridge, John Law, s.B. (Wesleyan Univ.) 1888, Brine, Elmer Louis, Burke, Francis Ramon, Burns, Walter Linn, A.B., S.B. (Villanova Coll.) Burrage, Thomas Jayne, A.M. (Brown Univ.) 1899, Butler, Patrick Francis,

Butterfield, William Jenkins,

Cassidy, James Joseph,

Strong, Me.
Newton Centre.
Malden.
Fitchburg.
Boston.
Hyde Park.
Dubuque, Ia.

Wakefield. Fort Dodge, Ia.

Yarmouth.

Brookfield.
E. Greenwich, R.I.
Worcester.
Cambridge.
Beachmont.

Framingham. Head Tide, Me. Fall River. Cambridge. Boston. Roxbury. Newton Highlands. Boston. W. Roxbury. W. Newton. Springfield. No. Cambridge. Lowell. Hazardville, Conn. Somerville. Quincy.

Lawrence.

Portland, Me.
Dorchester.
Andover.
Lowell.

Chase, Theodore Woolsey, A.B. (Dartmouth Coll.) Hanover, N.H. 1899, Clark, George Oliver, A.B. 1900, Boston. Dover, N. II. Clarke, George William, Cook, Philip Howard, A.B. 1899, Portland, Me. Cunningham, Wilfred Bernard, Cambridge. Dearborn, Henry Hale, A.B. (Dartmouth Coll.) Milford, N.H. 1899. Worcester. Deering, George Edwin, Dixon, Patrick Joseph Harkins, A.B. (Holy Cross Holyoke. Coll.) 1895, Drake, Percy Greenough, s.B. (Dartmouth Coll.) Greenland Depot, N.H. 1899, Boston. Draper, Arthur Derby, Duncan, Charles, B.L. (Dartmouth Coll.) 1898, Chelsea. Emerson, George Edward, Everett. Dorchester. Emery, William Campbell, England, Albert Charles, Pittsfield. Eveleth, Charles Wonson, s.B. (Tufts Coll.) 1899, Marblehead. Fennessey, John Francis, A.B. (Univ. of Notre Boston. Dame) 1899, Dorchester. Fitch, Ralph Roswell, Flint, Edward Rawson, s.B. (Mass. Agr. Coll.) 1887, PH.D. (Univ. of Göttingen) 1892, Clifton. Brookline. Flint, John, A.B. 1898, Brookline. Floyd, Cleaveland, Lubec, Me. Fountain, Oliver Reynolds, Lowell. Gaffney, James Francis, Gafney, Harry Dabol, Petersham. Galvin, Augustus Hughes, Dorchester. Gloucester. Garland, Roy, A.B. 1899, Gifford, Nathaniel Howland, A.B. (Brown Univ.) Wellington. 1899, Graham, Simon Peter, Newburyport. E. Boston. Grainger, Edward John, A.B. (Boston Coll.) 1898, Graves, Robert John, s.B. 1900, Penacook, N.H. Green, Abraham, Boston. Grover, Arthur Leon, PH.B. (Brown Univ.) 1898, Portland. Me. Halligan, Edward Maurice, So. Boston. Charlestown. Hamilton, Frank Andrew, Hanson, William Clinton, A.B. 1899, Cambridge. Hawes, John Bromham, 2d, Cambridge. Marblehead. Hickey, John Joseph,

Hill, George Jackson, Hill, Prescott Spalding, Hindle, William, Holt, Edward Wells Atwood, Holt, Harry Frye, Homans, John Alden, A.B. 1899, Hopkins, Frank Henry, Hunt, Wilson Eugene, Hurley, John Joseph, A.B. (Mt. St. Mary's Coll.) 1898, A.M. (ibid.) 1900, Hussey, Edward John, A.B. (Holy Cross Coll.) 1899, Jackson, George Henry, Joyce, Frederick Lawerance, Kahn, Isidore Stanley, Keith, Albert Russell, A.B. (Colby Univ.) 1897, Kelley, Jacob Sleeper, Kelly, William Dugan, Lane, John William, A.B. 1899, Lane, Peter Henry, B.L. (Dartmouth Coll.) 1899, Lee, Ralph Everett, Lilley, Albert Henry, Lincoln, Clark Richardson, Lloyd, Henry Demarest, Jr., A.B. 1899, Loftus, John Thomas, PH.G. (Mass. Coll. of Pharm.) 1898, McAllister, John Joseph Hector, A.B. (Fordham Coll.) 1899, McAusland, William Russell, McCaffrey, Charles Francis, s.B. 1899, McSweeney, Daniel Justin, A.B. (Boston Coll.) 1889, Macleod, William Preston, Maguire, Thomas Joseph, Mahon, Edward, Mahoney, Daniel Francis, Mahoney, Francis Xavier, M.D.v. 1892, Mansfield, Walter Ralph, Martin, Dwight Clifford, D.M.D. 1900, Maxfield, George Henry, Mayhew, Orland Smith,

Moline, Charles, s.B. 1900,

Morse, Vernon Chipman,

Beverly.
Newton.
Providence, R.I.
No. Andover Depot.
Andover.
Boston.
So. Boston.
London, N.H.

Boston.

Holyoke.
Plymouth.
San Francisco, Cal.
Dallas, Tex.
Waterville, Me.
W. Newton.
Boston.
Dorchester.
Nahant.
Chelsea.
New Bedford.
Dorchester.
Winnetka, Ill.

Worcester.

Waltham.
Taunton.
Somerville.

Boston.

Natick.

Cambridge.

Ottumwa, Ia.
Lowell.
Boston.
Boston.
Providence, R.I.
Franklin, N.H.
No. Tisbury.
Sunderland.
Paradise, N.S.

Neary, Anthony Gregory, Dorchester. Norris, Albert Perley, s.B. (Mass. Inst. of Tech.) 1897. Cambridge. North, Howard Manning, Boston. Oakman, Carl Shepard, Dorchester. O'Brien, Daniel Paul, M.D.v. 1899, Chelsea. O'Hearn, Daniel Aloysius, A.B. (St. Bonaventures Coll.) 1898, Lowell. O'Reilly, William Francis, Dorchester. Osgood, George, Brookline. O'Shea, Richard Joseph, A.B. (Gonzaga Coll.) Spokane, Wash Packard, Loring Bradford, A.B. (Yale Univ.) 1899. Sharon. Parker, David Woodbury, A.B. (Dartmouth Coll.) Goffstown, N.H. Parker, Ernest Lawrence, Worcester. Pearce, Arthur Cushing, Somerville. Phelps, Joseph Royal, Cambridge. Raymond, Loring Hay, Somerville. Reardon, Daniel Bartholomew, W. Quincy. Rice, Alexander Hamilton, A.B. 1898, Boston. Rice, Robert Astley, s.B. (Amherst Coll.) 1898, Fitchburg. Richardson, Frank Linden, Concord. Richmond, Fred Marcy, Everett. Roberts, Albert Joseph, Weston. Rochette, Edward Charles, Worcester. Ross, Wayland, Boston. Ruston, Warren Dunn, W. Somerville. Ryan, John William, D.M.D. 1900, Cambridge. Sanger, Guy Edward, Watertown. Sargent, Walter Leslie, A.B. (Williams Coll.) 1899, Quincy. Shanks, Charles, New Bedford. Sibley, Hartwell Astor, Dorchester. Sims, Frederick Robertson, Melrose. Skarstrom, William, Boston. Smith, Homer Brandel, A.B. 1900, Lancaster, N.H. . Smith, Hervey Lewis, Smith's Ferry. Spicer, George Thurston, A.B. (Brown Univ.) 1897, Providence, R.I. Stanton, Joseph, Ph.G. (Mass. Coll. of Pharm.) 1899. Cambridge. Stone, Murray Chaffee, Fitchburg. Stone, Ralph Edgarton, Waltham. Stone, Thomas Newcomb, Wakefield.

Sullivan, Edward Coppinger, Sullivan, Timothy Joseph,

Taylor, Ewing, A.B. (Williams Coll.) 1895,

Thomas, Thomas Hasbrouck, A.B. (Lincoln Univ.) 1894.

Thompson, Joseph Mariner, Tobey, George Loring, Jr.,

Tolman, Henry, Jr.,

Trueman, Nelson Gore, D.M.D. 1900,

Tyler, Winsor Marrett, A.B. 1899,

Vickery, Eugene Augustus, Walker, William Hastings,

White, Arthur Joseph, A.B. (Boston Coll.) 1898,

Whitehouse, Dizer Eugene,

Whitford, Robert Atwood, A.B. 1898,

Whitney, Edward William,

Williams, Frederick Smith, A.B. 1897,

Winslow, Benjamin Sabert, Wolbach, Simeon Burt,

Woodward, Walter Carleton, B.L. (Dartmouth

Coll.) 1899,

Young, Ralph Randal,

FIRST CLASS.

Amory, Ingersoll, A.B. 1892,

Andrews, Frederick Francis,

Arkin, Louis,

Austin, William Thomas,

Baker, Roscoe Chase, A.B. (Yale Univ.) 1900,

Baldwin, Charles Hume, A.B. (Williams Coll.) 1900,

Barnes, William Lester, A.B. 1900,

Barney, James Dellinger, A.B. 1900,

Barron, Elmer Walter, A.B. (Tufts Coll.) 1900,

Bartlett, Daniel Edwin,

Bastian, George Leon,

Beals, Lynn Staley, A.B. 1900,

Beeley, Leon Gage, A.B. 1900,

Bell, Conrad,

Bennett, Francis Arnold,

Berry, Martin Whitten, A.B. (Williams Coll.) 1895,

Bianco, Joseph Anthony,

Bickford, Eugene Aloysius, A.B. (Holy Cross Coll.) 1896,

Taunton. Cambridge.

Boston.

Cambridge.

Dorchester.

Clinton.

Newton.

Boston.

Lexington.

Dorchester.

Cambridge.

Dorchester.

Brighton.

Waltham.

Ware.

Waltham.

New Bedford.

Grand Island, Neb.

Randolph, Vt.

New Dorchester.

Boston.

E. Boston.

Boston.

Boston.

Billerica.

Medford.

No. Attleboro.

Roxbury.

Charlestown.

Cambridge.

Lawrence.

Mt. Vision, N.Y.

Lawrence.

Cambridge.

Somerville.

Portland, Me.

Orient Heights.

Boston.

Bigelow, Edward Bridge, A.B. (Dartmouth Coll.) Bigelow, George Lambert, Blake, Allen Hanson, Boden, Arthur Richard, Boyle, Jeremiah Joseph, Brennan, Thomas Joseph, Bridgham, Paul Chester, Brooks, Robert Hartley, A.B. (Dartmouth Coll.) 1900. Bullard, Channing Sears, Carr, Percy Whitman, Chace, Fenner Albert, A.B. 1897, Childs, Benjamin Henry, Clark, John Donovan, Clark, Nelson Henry, s.B. (Antioch Coll.) 1897, Clow, Fred Ellsworth, Coffin, Leslie Erwin, Conlon, Frank Aloysious, Connelly, John Edward, Connolly, William Edward, A.B. 1898, Conway, Charles Joseph, A.B. (Holy Cross Coll.) 1899, Costa, Joseph Fose, Cullinane, Timothy Joseph, Cunningham, Edward Albert, Curley, John Patrick, Cushing, Arthur Alden, Cusick, Laurence Francis, Dana, Harold Ward, A.B. 1900, Dana, Ralph Birtwell, Davis, John Boynton, Dearborn, Edmund Gerrish, A.B. (Dartmouth Coll.) 1900, Devine, Charles Francis, Dexter, Fred Fay, Dodd, Walter James, Doherty, Francis Joseph, Donaldson, Frederick Augustus, A.B. 1896, Donham, Albert Grenville, Downing, Andrew Francis, A.B. 1900, Drew, Charles Allen, B.s. (Dartmouth Coll.) 1900,

Drowne, Edwin Lewis,

Grafton.
Marlboro.
No. Cambridge.
Boston.
Cambridge.
So. Boston.
Cohasset.

Claremont, N. H.

Cambridge.
Hyde Park.
Fall River.
Boston.
Newtonville.
Clifton, O.
Wolfboro, N.H.
Canobie Lake, N.H.
Lawrence.
Reading.
Cambridge.

Millville.
Quincy.
Andover.
Cambridge.
Brighton.
Brookline.
Nahant.
Boston.
Somerville.
Newtonville.

Milford, N.H.
Roxbury,
Springfield.
Boston.
Woburn.
Somerville.
Portland, Me.
Cambridge.
Sharon.
Boston.

Drury, Dana Warren, Roxbury. Dyer, Ernest Arey, Boston. Easton, Charles Daniel, A.B. (Brown Univ.) 1899. A.м. (ibid.) 1900, Melrose. Easton, Frank Birch, A.B. (Brown Univ.) 1900, Melrose. Eaton, William Edward, So. Framingham. Ellam, Herbert William, Southbridge. Fabyan, Marshal, A.B. 1900, Brookline. Farmer, William Francis, Tewksbury. Fearney, Frank Albert, Lakewood, R.I. Fenwick, George Benson, A.B. 1900, Chelsea. Field, Henry Martyn, A.B. (Yale Univ.) 1900, Dorchester. Finkelstein, Harry, Boston. Fitzgibbon, Edward James, Worcester. Flynn, Henry Lawrence, Dorchester. Foss Alvin Warren, A.B. (Bates Coll.) 1897, E. Raymond, Me. Freedman, Louis Mark, Chelsea. Frothingham, Joseph Laforme, Boston. Gehring, Edwin Wagner, c.E. (Cornell Univ.) 1900. Boston. Gerrish, Lester Pierpont, A.B. (Bates Coll.) 1896, Lisbon, Me. Glass, George Waldron, A.M. (Dartmouth Coll.) 1887, Dover, N.H. Goddard, Samuel Warren, Brockton. Good, Frederick Leo, Cambridge. Goodwin, Percy Freeman, Winchester. Graves, James Chapman, A.B. (Amherst Coll.) 1899, Marblehead. Gray, Charles Perley, B.s. (Univ. of Maine) 1900, Old Town, Me. Grimes, Loring, Rockport. Hager, William Perry, s.B. 1900, So. Deerfield. Hagerty, Joseph James, Boston. Hancock, Albert William. Pembroke, N.H. Hanna, Carl Loy, A.B. (Wash. and Jeff. Coll.) 1900, New Castle, Pa. Hartwell, John Bryant, A.B. (Yale Univ.) 1900, Providence, R.I. Herman, Edwards Woodbridge, Boston. Hildreth, George Kelsea, A.B. (Dartmouth Coll.) Bethlehem, N.H. Hill, Johnson Washington, s.T.B. (Tufts Coll.) 1900, Everett. Hitchings, Frederic Wade, Dedham. Hoit, Henry Ambrose, Boston. Hosley, Walter Alexis, A.B. 1900, Springfield. Howe, George Plummer, A.B. 1900, Lawrence.

Hubbard, Wallace Eugene, Hull, Chester Lansdowne, Hurley, Edward Daniel, Inglis, Harry James, Johnson, Herbert William, Kenney, Thomas Francis, Kent, Ralph Porter,

Kent, Kaiph Torter,

Kidner, Frederick Clinton, A.B. 1900,

King, Henry Daniel,

King, Hamilton Theodore.

Kingman, Lucius Collinwood, A.B. (Yale Univ.) 1900.

Lahey, Francis Howard. Lahey, John James,

Lamar, Joseph Alphonsus Henry,

Leahy, James Percival, Lee, Cornelius Benedict, Lee, William George,

Lentine, Gaspare Emmanuel, Lewis, James Prince, Jr..

Lewis, Louis,

Linenthal, Harry, A.B. 1900.

Longfellow, Henry Nathan. PH.G. (Mass. Coll. of Pharmacy) 1890,

Lowney, Jeremiah Joseph,

Luce, Dean Sherwood,

Lutz, Frederick Louis,

Lynch, James Edward, A.B. (Holy Cross Coll.) 1898,

McAllester, Ralph William, A.B. 1900,

McClintock, Francis Blake, McGaffigan, Bernard Francis,

McKee, George Joseph, McLean, John Allen,

McLellan, Malcolm Sawyer, McVey, Frederick Joseph, Mahoney, Joseph John,

Marshall, Harold Kenneth.

Marshall, Herman Prince, Meisenbach, Roland Otto,

Mendelsohn, Louis,

Messinger, Harry Carleton,

Morrill, Gordon Niles,

Somerville.

Cambridgeport. So. Boston.

Middletown. Conn.

Watertown.
Worcester.

Attleboro.
Boston.

Springfield. Newport. R.I.

Providence, R.I.

Haverhill. Southboro.

Boston.
Middleboro.

Boston.

Chicago, 111.
Boston.

Dorchester.

Providence, R.I.

E. Boston.

George town.

Fall River.

Vineyard Haven.

Boston.

Norwich Town. Conn.

Randolph.
Chelsea.
Charlestown.
E. Cambridge.
Somerville.

Melrose Highlands.

Boston.
Dorchester.
Boston.
Gloucester.
St. Louis, Mo.

Boston.

E. Providence, R.I.

Boston.

Morse, Nathaniel Niles, B.L. (Dartmouth Coll.) 1900.

Nelson, Louis, A.B. 1900.

Newton, Roland Stephen. Nutting. Joseph Francis.

Oak, Charles Arthur,

O'Brien. Stanislaus Patrick,

Oliver, Everard Lawrence,

O'Neill, Harry Joseph. A.B. (Villanova Coll.) 1898, Ordway, Clarence Eugene, A.B. (Vale Univ.) 1900,

O'Sullivan, William Daniel, B.L. (Dartmouth

Coll.) 1900,

Page, Harry Merton,

Percival, Charles Gilbert,

Philbrick, Roscoe Hunter, Phillips, John Charles, s.B. 1899,

Phippen, Walter Gray, A.B. 1900,

Place, Edwin Hemphill, Quinn, James Francis,

Reed, Edwin Clarence,

Regan, Frank Alfred,

Riemer, Hugo Bruno Charles,

Riley, John Donovan,

Robbins, Chandler, A.B. 1899,

Robbins, William Bradford, A.B. 1899,

Rogers, John Conway, Jr., A.B. (Bowdoin Coll.) 1899,

Rogers, Mark Homer, A.B. (Williams Coll.) 1900,

Russell, Charles Bradley, B.s. (Illinois Coll.) 1899,

Salmon, Edward Lawrence,

Seaver, Edwin Pliny, Jr.,

Seymour, Frederick Ward,

Seymour, Malcolm,

Shanahan, Edmund Francis, A.B. (Holy Cross Coll.) 1898,

Sherburne, Andrew Edward, A.B. 1897,

Shoninger, Lee Simon, PH.B. (Yale Univ.) 1900,

Smyth, Patrick Somers, A.B. (St. Francis Xavier Coll.) 1896,

Spear, Louis Mahlon, A.B. (Bowdoin Coll.) 1900, Stanley, Francis Guy, B.S. (Mass. Agr. Coll.) 1900,

Staples, Clarence Hathorne, A.B. (Wesleyan Univ.) 1900.

Brooklyn, N. Y.

Roxbury.

Fayville.

Ludlow.

Revere.

Lowell.

Boston.

Boston.

Winchester.

Lawrence.

Guilford, Me.

Boston.

W. Somerville.

Boston.

Salem.

Francestown, N.H.

Charlestown.

Somerville.

Natick.

Norwood.

Lowell.

Weston.

Weston.

Pembroke, Me.

Allston.

Stockbridge.

Southboro.

Waban.

Holyoke.

Holyoke.

So. Groveland.

Roxbury.

New Haven, Conn.

Port Hood, N.S.

Gardiner, Me.

Sudbury, Vt.

Lowell.

Starr, Frederick Burgess, A.B. (Acadia Coll.) 1900,	No. Cambridge.
Strauss, Sidney,	Pittsfield, Ill.
Sturgis, Milton Gorham, A.B. (Bates Coll.) 1900,	Lewiston, Me.
Sturnick, Max,	Boston.
Sullivan, Charles Brent,	Boston.
Sullivan, John Joseph,	Lawrence.
Swain, Edward Earle, A.B. (Boston Univ.) 1900,	Worcester.
Taylor, Ralph,	Boston.
Timmins, Edward Francis,	So. Boston.
Trayes, William Henry, Jr.,	Boston.
Van Magness, Fred,	Chelsea.
Van Wagner, Le Grand,	Syracuse, N.Y.
Vinal, Charles Renough,	So. Boston.
Wald, Rudolph Henry,	Boston.
Waldstein, Charles,	Boston.
Watts, Joseph Palmer,	Chelsea.
Wheeler, Henry Hamilton,	Spencer.
Wheelock, Frank Robert,	Danvers.
Whiting, Nye Clinton,	So. Springfield.
Whitney, Ray Lester, Ph.B. (Brown Univ.) 1900,	Winchendon.
Whiton, Ross Kittredge, A.B. 1900,	Quincy.
Williams, John Thomas,	Roxbury.
Wilson, James Cornelius,	Hartford, Conn
Woodbury, Willard Porter, A.B. 1900,	Beverly.
Young, Herbert Walter,	Boston.
Young, John Albion, Ph.B. (Brown Univ.) 1900,	Campello.
20 ang, 00 and 22 and 10 and 1	
SUMMARY.	
In Courses for Graduates, 1900-1901 (to	Nov. 1) . 12
FOURTH CLASS	
THIRD CLASS	125
SECOND CLASS	153
First Class	
2 1002 (2100)	
Total	603
In Courses for Graduates 1899–1900 after	_
of Catalogue for 1899–1900	
In Summer Courses, 1900	149

THE SUMMER SCHOOL OF MEDICINE.

Alden, Eliot, A.B. 1897, Allen, Horatio Cushing, A.B. (*Brown Univ.*) 1897,

Allen, Howard Louis,

Amory, Ingersoll, A.B. 1892,

Bailey, William Thomas, B.L. (Dartmouth Coll.) 1891, M.D. 1900,

Barnes, Lynn Moore, A.B. 1896, M.D. 1900,

Bingham, Anne Tefft, M.D. (Syracuse Univ.), 1900,

Binney, Horace, A.B. 1897,

Blake, Gerald,

Brown, Lorenzo Starr, Jr., B.L. (Furman Univ.) 1900,

Bulkeley, Frank Stedman,

Bull, William Tillinghast, Ph.B. (Yale Univ.) 1888,

Bullard, Channing Sears,

Burns, Walter Linn, A.B. (Villanova Coll.) 1897,

Bush, Camillus, s.B. (Univ. of California) 1898,

Cheever, David, A.B. 1897,

Connolly, John Matthew, A.B. (Holy Cross Coll.) 1890, A.M. (ibid.) 1892, M.D. 1900,

Cooper, Roy Cummings, s.B. (Princeton Univ.) 1898,

Cowan, Marion, Ph.G. (Mass. Coll. of Pharm.) 1898,

Curley, John Patrick,

Cusick, Laurence Francis,

De Normandie, Robert Laurent, A.B. 1898,

De Wolf, Halsey, A.B. 1892, M.D. (*Univ. of Pa.*) 1897,

Dexter, Fred Fay,

Dinsmore, Avery Elisha,

Dixon, Patrick Joseph Harkins, A.B. (Holy Cross Coll.) 1895,

Washington, D.C.

Marion.

Fall River.

Boston.

Boston.

Decatur, Ill.

Watertown, N.Y.

Middletown, Conn.

Boston.

Washington, D.C.

Ayer.

Newport, R.I.

Cambridge.

Lawrence.

Woodland, Cal.

Boston.

Dorchester.

Bellevue, Pa.

Lynn.

Brighton.

Nahant.

Roxbury.

Providence, R.I.

Springfield.

Lower Bartlett, N. II.

Holyoke.

Dodge. Fred Wilder. M.D. (Boston Univ. School of Med.) 1891, Boston. Emmons, Arthur Brewster, A.B. 1898, Brookline. Enebuske. Claës Julius, A.M., PH.D. (Royal Univ. Lund, Sweden), 1886, M.D. 1896, Boston. Everett, Eugene Ellsworth, A.B. (Brown Univ.) 1894, м.р. 1899, Boston. Fabyan, Marshal, A.B. 1900, Brookline. Farmer, William Francis, Tewksbury. Fassett, Fred Julius, A.B. (Yale Univ.) 1898, Montpelier, Vt. Fearney, Frank Albert, Lakewood, R.I. Fenelon, Katherine Agnes, Boston. Feiss, Henry Otto, A.B. 1898, Cleveland. O. Finkelstein, Harry, Boston. Flagg, Elisha, A.B. 1887, Boston.Flower, Alfred Horace, Boston. Flynn, Henry Lawrence, Boston. Fosgate, Elmer Gilman, M.D. (Dartmouth Coll.) 1888, Ashburnham. France, Joseph Jabez, M.D. (Univ. of Pennsylvania) 1893. Portsmouth, Va. Francis, William Willoughby, A.B. (Johns Hopkins Univ.) 1898, Toronto, Ont. Frothingham, Joseph Laforme, Boston. Gay, Almon Deboise, M.D. 1875, Waverley. Garland, Frederick Eugene, A.B. 1898. Gardner. Buffalo, N.Y. Glenny, W. Harry, Ph.B. (Yale Univ.) 1894. Goodridge, Frederick James, A.B. 1898, Cambridge. Graham, Simon Peter, Newburyport. Griswold, Ellen Chase, A.B. (Radcliffe Coll.) 1891, Boston. Groppner, Max Carl, Jamaica Plain. Groves, Lovett Bean, Boston. Roxbury. Hagerty, Joseph James, Hall, Milton Weston, s.B. (Mass. Inst. of Tech.) 1900, Evanston, Ill. Hamilton, Annie Lee. M.D. (Women's Coll., New York Infirmary) 1898, Boston. Hands, Anna Carville, M.D. (Tufts Med. School) No. Cambridge. Hatch, Leonard Francis. M.D. (Univ. of Michigan) 1887, Lynn. Horst, Carl Herman, A.B. (Stanford Univ.) 1898, Butte City. Mont.

Cambridgeport.

Hull, Chester Lansdowne,

Jeffrey, Stewart Lee,

Jones, Claude Perry, M.D. 1893,

Jones, Frank Joseph,

Kane, John Austin,

Keene, Charles Herbert, A.B. 1898,

Kelley, Walter Henry,

Kent, Bradford,

Lahey, Frank Howard,

Lamar, Joseph Alphonsus Henry,

Lawrence, Nellie Louise, M.D. (Woman's Med.

Coll. of Pennsylvania) 1896,

Lazelle, Horace Gibbs, M.D. (Univ. Coll. of Medicine) 1900,

Linenthal, Harry, A.B. 1900,

Lloyd, Henry Demarest, Jr., A.B. 1899,

Lloyd, Simeon Palmer, A.B. (Atlanta Univ.) 1889,

M.D. (Univ. of Pennsylvania) 1893,

Lootz, Emma, A.B. (Smith Coll.) 1897,

Loughran, James Francis, M.D. 1896,

Lowell, William Holbrook,

MacCormick, John Allen,

McGoldrick, Edward James,

MacLachlan, Thomas Mitchell, M.D. 1900,

McPherson, Ross, A.B. 1898,

McVey, Frederick Joseph,

Mahon, Edward,

Mason, Nathaniel Robert, A.B. (Yale Univ.) 1897,

Mellus, Edward, A.B. 1895,

Miller, Walter McNabb, B.S. (Ohio State Univ.) 1885, M.D. (Cooper Med. Coll.) 1895.

Miller, William Whitfield,

Mills, Lloyd Hunter,

Mitchell, Arthur, M.D. (Boston Univ.) 1886,

Moore, Philip Henry, A.B. (Bowdoin Coll.) 1894,

Mooring, Scott Webber,

Muhlberg, William, M.D. (Ohio Med. Coll.) 1897,

Mulherin, William Anthony, A.B. (St. Joseph's Coll.) 1891,

Murphy, Fred Towsley, A.B. (Yale Univ.) 1897,

Nute, Albert James, PH.G. (Univ. of Maine) 1897,

s.в. 1899,

Oak, Charles Arthur,

O'Brien, Stanislaus Patrick,

Hackensack, N.J.

Southboro.

Worcester.

Charlestown.

Allston.

Dorchester.

Dorchester.

Haverhill.

Boston.

Roxbury.

W. Somerville.

E. Boston.

Winnetka, Ill.

E. Savannah, Ga.

Boston.

Lowell.

Newton.

Lake Ainslee, N.S.

Cambridge.

Brighton.

Cambridge.

Dorchester.

Ottumwa, Ia.

No. Conway, N. H.

Worcester.

Reno, Nev.

Memphis, Tenn.

North Haven, Me.

Medfield.

Saco, Me.

Gloucester.

Cincinnati, O.

Augusta, Ga.

Junction City, Kans.

Winthrop.

Revere.

Lowell.

Palfrey, Francis Winslow, A.B. 1898, Peters, William Chute, Petluck, Joseph, M.D. (Tufts Med. School) 1898, Phelps, Joseph Royal, Piper. James Rufus, D.D.S. (Boston Dental Coll.) 1886, Porter, Elizabeth Dwight, Porter, Robert Brastow, A.B. 1897, Prescott, Frank William, Prescott, Henry Dudley, A.B. 1898, Quinby, William Carter, A.B. 1899, Quinn, James Francis, Ramsey, Frank William, Reed, Edwin Clarence, Rees, Rees Bynon, M.D. (Univ. of Maryland) 1900, Regan, Frank Alfred, Rice, Robert Astley, s.B. (Amherst Coll.) 1898, Richardson, Anna Gove, M.D. (Woman's Med. Coll. of Pennsylvania) 1892, Richardson, Frank Chase, M.D. (Boston Univ. School of Med.) 1879, Richmond, Ernest Dalton, M.D. (Univ. of Vermont) 1894, Robbins, Michael Uriah, Robinson, Louis Sydney Bassford, A.B. 1897, Robinson, Samuel, A.B. 1898, Robson, Charles Edward, Rolfe, William Alfred, M.D. 1890, Rollins, Edwin Theodore, Sayles, Joseph Borland, M.D. (Dartmouth Coll.)

Sennott, John Ralph,

Skarstrom, William,

1887, M.D. (Bellevue Hosp. Med. Coll.) 1888, Schallenbach, Ernest Bradford, Shaw, Frederick King, Shea, John Joseph, M.D. 1897, Sherburne, Andrew Edward, A.B. 1897, Sibley, Hartwell Astor, Jr. Sims, Frederick Robertson, Smith, John Hall, M.D. (Louisville Med. Coll.) Snow, Frank Whipple, Southard, Elmer Ernest, A.B. 1897,

Boston. Boston. Cambridge. Newton Centre. Hatfield. Quincy. Boston. New Bedford. Worcester. Charlestown. Charlestown. Somerville. Columbus, O. Natick. Fitchburg. Boston. Boston. Reading. Newton. Chicago. Ill. Boston. E. Boston. Boston. Newtonville. Dighton. Dorchester. Cambridgeport. Roxbury. Beverly. Roxbury. Dorchester. Melrose. Boston. Boston. Newburyport. Boston.

Boston.

Stiles, Charles Wallace, M.D. (Boston Univ. Med. School), 1878,

Stiles, Fred Merritt, M.D. (Med. School of Maine) 1890,

Stoneroad, Rebecca,

Streeter, George Linius, A.B. (Union Coll.) 1895, A.M. (Columbia Coll.) 1899, M.D. (ibid.) 1899, Sullivan, Charles Brent,

Tallant, Alice Weld, A.B. (Smith Coll.) 1897,

Thorndike, Townsend William,

Torbert, James Rockwell, Ph.B. (Yale Univ.) 1895,

Vincent, Beth, A.B. 1898,

Vinal, Charles Renough,

Whitford, Robert Atwood, A.B. 1898,

Whiton, Ross Kittredge, A.B. 1900,

Whittier, Frank Nathaniel, A.M. (Bowdoin Coll.) 1888, M.D. (Med. School of Maine) 1889,

Wiggin, William Irving,

Williams, Augusta Gilbert, M.D. (Woman's Med. Coll. of Pa.) 1894,

Wolcott, Grace, M.D. (Woman's Med. Coll. of Pa.) 1884,

Allston.

Waltham.

Washington, D.C.

Johnstown, N.Y.

Lawrence.

Northampton.

Boston.

Dubuque, Ia.

Fort Dodge, Ia.

So. Boston. Waltham.

Quincy.

Brunswick, Me.

Lowell.

Brookline.

Boston.









